AGENDA
Wednesday, August 28, 2019 – 6:00 PM

CONSENT AGENDA: ALL ITEMS MARKED WITH A SINGLE ASTERICK (*) ARE PART OF THE CONSENT AGENDA AND REQUIRE NO DELIBERATION BY THE UNITED BOARD OF HEALTH. ANY BOARD MEMBER MAY REMOVE AN ITEM FROM THIS AGENDA TO BE CONSIDERED SEPARATELY.

PROCEED TO BOTTOM OF THIS DOCUMENT FOR APPEARANCE & EXECUTIVE SESSION GUIDELINES

In accordance with the provisions of the Americans with Disabilities Act (ADA), persons in need of a special accommodation in order to participate in this proceeding should, within two (2) days prior to the proceeding, request necessary accommodations by contacting GCHD’s Executive Office Coordinator at 409-938-2273, or via email at awolff@gchd.org.

ANY MEMBERS NEEDING TO BE REACHED DURING THE MEETING MAY BE CONTACTED AT 409-938-2288

REGULARLY SCHEDULED MEETING

Meeting Called to Order
Pledge of Allegiance

*Item #1 ACTION ..........................................Agenda

*Item #2 ACTION.........................................Excused Absence(s)

*Item #3 ACTION ........................................Consider for Approval Minutes from the July 31, 2019 United Board of Health Meeting

*Item #4 ACTION........................................Annual Policy/Plan Reviews
   a) Fiscal Management Policy
   b) Anti-Fraud Policy
   c) Drug-Free Workplace Policy
   d) Employee Assistance Program Policy
   e) Employee Corrective Action Policy
   f) Performance Evaluation Policy
   g) Separation of Employment Policy
   h) Sexual Harassment Policy
   i) Vehicular Accidents/Incidents Policy
   j) Volunteer Policy
   k) Employee Pre- hire Immunization and Screening Policy

*Item #5 ACTION .....................................Consider for Approval City of Bayou Vista’s Re Appointments to the Animal Services Advisory Committee

*Item #6.......................................................Informational Reports
   a) CHW June 2019 Financial Report
   b) Morbidity Report
   c) Letter of Support for a 319 Grant for a Watershed Protection Plan for Clear Creek

Item #7....................................................Executive Report

Item #8 ACTION........................................Overview of Public Health Accreditation Board Standards and Approval of Proposed Next Steps

Item #9.......................................................Presentation by Management Advisory Group (MAG) on Classification and Compensation Study
Item #10 ACTION...........................................Consider for Approval July 2019 Financial Report

Item #11 ACTION...........................................Consider for Approval the FY20 Fee Schedules for the Following Programs:  
  a) Vital Statistics  
  b) Environmental Fees

Item #12 ACTION...........................................Introduction of Proposed Change to Animal Services Policy as Recommended by the Animal Services Advisory Committee (Step 1 of 3)

Item #13 ACTION...........................................Tabled from Last Meeting: Consider for Approval the County Hiring an Outside Company to Evaluate all the Executive Positions in The District (Submitted by John Hackbarth, DDS)

Item #14 ACTION...........................................Consider for Approval Enacting a Board Procedure to Conform with House Bill 2840

Item #15............................................................Comments from Board Members

Adjournment

Next Meeting: September 25, 2019

Appearances before United Board of Health

A citizen desiring to make comment to the Board shall submit a written request to the Chief Executive Officer by noon on the Wednesday preceding the Wednesday Board meeting. A statement of the nature of the matter to be considered shall accompany the request. The Chief Executive Officer shall include the requested appearance on the agenda, and the person shall be heard if he or she appears.

Executive Sessions

The United Board of Health may recess into closed meeting (Executive Session) on any item listed on this agenda if the Executive Session is authorized under the Open Meetings Act pursuant to one or more the following exceptions: Tex. Gov’t Code §§ 551.071 (consultation with attorney), 551.072 (deliberation regarding real property), 551.073 (deliberation regarding a prospective gift or donation), 551.074 (personnel matters), 551.0745 (personnel matters affecting County advisory body), 551.076 (deliberation regarding security devices or security audits), and/or 551.087 (deliberations regarding economic development negotiations). The Presiding Officer of the United Board of Health shall announce the basis for the Executive Session prior to recessing into Executive Session. However, the United Board of Health may only enter into the Executive Session on any agenda item for which a separate Executive Session has not been separately posted if, prior to conducting the Executive Session, a majority of the Board votes to go into Executive Session. This motion requirement does not apply to any agenda item that has been previously noticed to constitute or include an Executive Session.

The steps for enacting this procedure shall be as follows:

1. A Board member recommends that the discussion, so long as it pertains to one of the permissible exceptions noted above, be moved to a closed forum;

2. Additional detail about the subject-matter and why it should be discussed by the Board in private be provided to citizens in attendance, and citizens be offered the opportunity to ask questions about the matter which are to be answered at the discretion of the Board; and

3. An action or vote to commence for moving into Executive Session be passed by a majority Board members.
United Board of Health
August 2019
Item #2
Excused Absence(s)
United Board of Health
August 2019
Item #3
Consider for Approval Minutes from the July 31, 2019 United Board of Health Meeting
Galveston County United Board of Health  
July 31, 2019

Board Members Present:
Ben Raimer, MD  
Eric Froeschner  
Mary Jo Godinich, MD  
Holly Lilley  
Tripp Montalbo  
Della Brown, RN  
John Hackbarth, DDS  
Dr. Chad Clause  
Dr. Annette Jenkins  
Barry Terrell  
Dewey Brunt III, PE

Excused Absence(s): Curtis Klages, DVM and Patrick McGinnis, MD

Unexcused Absence(s): None

Items # 1-8 Consent Agenda
A motion was made by Mr. Brunt to approve the consent agenda items one through eight. Dr. Clause seconded the motion and the Board unanimously approved the consent agenda items one through eight.

Item # 9 Executive Report
Kathy Barroso, Chief Executive Officer, presented the July 2019 Executive Report to the Board.

Item # 10 Overview of Public Health Accreditation Board Standards
Kathy Barroso, Chief Executive Officer asked the board to defer this item. Mr. Montalbo made a motion to defer this item to an upcoming agenda. Ms. Brown seconded the motion and the Board unanimously approved.

Item # 11 Consider for Approval June 2019 Financial Report
Andrea Cortinas, Chief Financial Officer, presented the June 2019 financial report to the Board. A motion to approve the monthly financial report as presented was made by Dr. Jenkins and seconded by Ms. Lilley. The Board unanimously approved the June 2019 financial report. Dr. Hackbarth requested an explanation of the financial report so that he can better understand the report. Ms. Brown, Mr. Brunt, Ms. Lilley, Dr. Jenkins along with Dr. Hackbarth expressed interest in a further explanation of the financial report as well. Dr. Raimer suggested this explanation take place at 5:00 pm on August 28, 2019 prior to the Board meeting so all interested members can attend. Dr. Hackbarth agreed on this date and time.

Item # 12 Consider for Approval Quarterly Compliance Report
Rocky Mosquera, Chief Compliance Officer, presented the quarterly compliance report to the Board. A motion to approve the report as presented was made by Dr. Hackbarth and seconded by Ms. Lilley. The Board unanimously approved the quarterly compliance report.
**Item #13 Consider for Approval Replacement of GAAA Supervisor Vehicle**
Andrea Cortinas, Chief Financial Officer, asked the Board for authorization to spend an additional $28,137.38 out of fund balance reserves to purchase the GAAA supervisor replacement vehicle that was involved in a serious collision resulting in a total loss claim by the insurance company. A motion to approve the request as presented was made by Mr. Froeschner and seconded by Dr. Hackbarth. The Board unanimously approved the request.

Dr. Raimer asked the Board to consider signing a resolution supporting Galveston Bay Estuary Program’s, the Galveston Bay Plan, 2nd Edition, the Comprehensive Conservation and Management Plan for the Galveston Bay Ecosystem. A motion to adopt the resolution was made by Mr. Froeschner and seconded by Dr. Hackbath. The Board unanimously approved the motion.

**Item #15 Presentation on Recent State Legislative Changes Regarding Certain County and Public Health District Fees**
Marty Entringer, Consumer Health Manager, gave the Board an overview of the recent legislative changes regarding County and Public Health District fees and how the District plans to explore restructuring of the fees. The proposed fees will be brought to the August 2019 Board meeting for Board review and approval.

**Item #16 Consider for Approval the County Hiring an Outside Company to Evaluate all the Executive Positions in The District (Submitted by John Hackbarth, DDS)**
Dr. Hackbarth recommended that the County hire Consultants for an outside objective opinion to evaluate executive positions so the Board has a better understanding of how effective the executive positions are. Consultants would look at the executive roles to ensure the job descriptions match what is being done and develop metrics for future evaluations. Dr. Raimer made a motion to table this item until the August 2019 meeting in order to gather additional information. Dr. Hackbarth seconded the motion and Board unanimously approved the motion.

**Item #17 Consider for Approval Sending United Board of Health Members to National Association of Local Boards of Health 2019 Annual Conference in Denver, CO from August 14-16, 2019 (Submitted by Eric Froeschner)**
Mr. Froeschner expressed his long-time interest in going to the National Association of Local Boards of Health Annual Conference. He asked that other members that can attend consider going August 14-16, 2019 in Denver, CO and suggested that if Board members could not attend this conference to plan to go to one in the future. Mr. Froeschner made a motion to approve an amount not to exceed $7,000 to send Board members to the National Association of Local Boards of Health 2019 Annual Conference in Denver, CO. Dr. Hackbarth seconded the motion and the Board unanimously approved the motion.

**Item #18 Comments from Board Members**
The following comments were made by Board members:
- Dr. Hackbarth appreciated the list of grants that was sent out to the Board members.

Chair/Vice-Chairperson

Secretary/Treasurer

Date

Date

Back to Agenda
United Board of Health
August 2019
Item #4

Annual Policy/Plan Reviews
a) Fiscal Management Policy
b) Anti-Fraud Policy
c) Drug-Free Workplace Policy
d) Employee Assistance Program Policy
e) Employee Corrective Action Policy
f) Performance Evaluation Policy
g) Separation of Employment Policy
h) Sexual Harassment Policy
i) Vehicular Accidents/Incidents Policy
j) Volunteer Policy
k) Employee Pre-hire Immunization and Screening Policy
Fiscal Management

Audience

This policy applies to Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”).

Purpose

The purpose of the District Fiscal Management Policy is to provide guidance on the accounting and administration of District local, federal and state funding and to establish accountability and provide adequate controls to effectively monitor revenue and expenditures as designated in the annual budget. This policy is intended to guide the District staff, as well as the United Board of Health and Coastal Health & Wellness Governing Board, in their responsibilities regarding fiscal management.

Internal Control Procedures

Each Board is responsible for the efficient, effective and financially sound operation of the organization that it oversees, and designates responsibility to designated District personnel to manage funds according to approved budgets, and to maintain the overall adequacy and effectiveness of the internal control system. An internal control system should provide reasonable assurance that an organization will accomplish effectiveness and efficiency of operations, provide reliability of financial reporting, and ensure compliance with applicable laws and regulations. Controls must ensure that assets are not exposed to unauthorized access and use. The designated District personnel have the responsibility to establish and maintain an adequate system of internal control and to furnish the Board(s), governmental agencies, District creditors, and other agencies reliable financial information on a timely basis.

To provide additional oversight, each Board will designate a group of Board members to function as a Finance Committee. The Finance Committee(s) will review monthly financial issues and/or reports of the organization for presentation to the entire Board(s). In addition, the Board(s) have the authority to approve and will incorporate into its own minutes such matters as (i) change of the organization’s name, (ii) adoption of the annual operating budget, (iii) selection or termination of the Chief Executive Officer, (iv) incurring debt, (v) investment policies (vi) designation of depository and investment banks (vii) purchase or sale of property, (viii) leasing of real property, (viii) institution, termination or settlement of any litigation, (x) opening up or closing checking or savings accounts, (xi) selection of the District’s public accountants, (xiii) signature authorities, and other such duties as detailed in the Board(s) by-laws. Annually, the Board(s), by its action, may designate such duties to District employees, as it deems appropriate.
Financial Management Procedures

It is the responsibility of the designated District personnel to assess financial operations and present the Board(s) with the information necessary to effect short-term management and long-term planning. Monthly financial statements should be available to the Finance Committee(s), for ultimate approval by the Board(s), no later than thirty days after the end of the month to which they relate. Monthly financial statements should include the balance sheet and summary of operations, and should compare actual results to budgeted results with variances explained by executive officers. The District’s accounting system will be organized and operated on a fund basis. As such, the District will maintain a General Fund and such Special Funds as needed. The General Fund, along with the Galveston Area Ambulance Authority will operate on a fiscal year ending September 30th. Coastal Health & Wellness will operate on a fiscal year ending March 31st. A qualified independent public accountant, selected by the Board(s), will conduct an annual audit in compliance with the Single Audit Act and GASB 34 requirements. In addition, the District will have prepared, and kept up to date an annual operating budget of revenue and expenses by fund which has been approved by the appropriate Board(s), and will adhere to guidelines established by the Controller-Chief Financial Officer to assure compliance with other requirements such as, insurance and bonding, sub-recipient monitoring, and financial reporting.

Accounting for Assets, Liabilities & Fund Balance

The District holds numerous assets including cash, receivables, inventories, property and equipment. It is the responsibility of the designated District personnel along with the Board(s) and Finance Committee(s), to ensure that policies and procedures are in effect that provide for the appropriate handling and use of these assets, and that obligations are paid and accounted for in a timely manner.

The Board(s), along with District staff, should ensure the following:

1. That there is sufficient cash to meet financial obligations, both in the short-term and long-term.
2. The District has established and follows appropriate credit and collection policies to ensure that payments are pursued and collected.
3. Inventories, property, and equipment are sufficiently controlled to ensure that the assets are appropriately used to the benefit of the District.
4. Obligations to vendors are paid appropriately and timely, and that District staff attempt to secure goods and services of appropriate quality and cost.
5. Vendors are selected based on consistency with regulatory requirements.
6. Contracts with third-party payers reflect the nature and cost of the services provided.

In order to comply with GASB 34 requirements, fixed assets will be accounted for in a self-balancing group of accounts separate and distinct from the regular General Ledger.
accounts called the **General Fixed Asset Account Group**, and Long term Liabilities will be recorded in the **General Long Term Debt Account Group**.

**Revenue Procedures**
District staff along with the Board(s) and Finance Committee(s) assume responsibility for ensuring that District services are billed according to the Board approved fee schedule, and that billings support requirements of third-party payers, when applicable. Procedures should also be in place to assure compliance with reimbursement requirements of grantor organizations as specified. Unbudgeted or excess revenue will be presented to the appropriate Finance Committee(s) and Board(s) for review and recommendation related to the use of these funds.

**Cost Accounting & Estimating Procedures**
The District will adhere to standards established in Statements of Federal Financial Accounting Standards (SFFAS) No. 4 which include: (1) accumulating and reporting costs of activities on a regular basis for management information purposes, (2) establishing responsibility segments to match costs with outputs, (3) determining the full cost of government goods and services, (4) recognizing the costs of goods and services provided by one federal entity to another, and (5) using appropriate costing methodologies to accumulate and assign costs to outputs. Practices used by District in accumulating and reporting actual costs will be consistent with its practices used in estimating costs for all programs. The District accounting system will accumulate and report related costs, distinguishing between District paid, donated services, space or equipment, and any program income authorized to be treated as match.

**Property Management Procedures**
The Board(s) have designated the responsibility to designated District personnel to ensure that an appropriate system is in place that adequately records, safeguards, and maintains property according to local, federal, and state standards. The District will maintain detailed records of all property and equipment, which include the description, location, serial number, vendor, acquisition cost, depreciation, and disposition as designated in the **District Fixed Asset Guidelines**. As requested, the District will provide such reports to the granting agency to which the District is accountable, and will abide by disposition instructions of the funding agency when the useful life of the asset has been met. A fixed asset inventory will be conducted annually and reconciled to equipment records. All financial and programmatic records, supporting documents, statistical records and other required or pertinent records of the District will be retained as indicated in the **Records Management Guidelines Policy**.

**Compensation Procedures**
The District follows compensation guidelines established by the FLSA (Fair Labor Standards Act). The Board(s), along with designated District personnel are responsible for (1) providing reasonable assurance that employees are paid at comparable rates for similar types of services in the local geographical area, and (2) that employee benefit programs are those of importance to employees, comparable to other competitors, and within the financial capabilities of the District. Normal work hours and payday schedules will be established by the Board(s). Currently, the District maintains a number of wage/salary
structures utilizing a grade/step structure in each. The wage/salary structure used for a particular employee depends on their primary funding source. Employees are compensated on a bi-weekly basis with the pay period beginning on Thursday and ending on Wednesday. For all paid positions, District will maintain an up-to-date and complete job description. Reimbursement for salary and wages will be based on documented timesheets submitted by the employee and approved by a responsible supervisory official. All employees are required to use the District’s authorized time sheet for reporting work week hours.

**Travel**
Employees traveling on District business will be compensated based on criteria established in the District Travel Procedures.

**Purchasing Procedures**
It is the policy of the District to adhere to the guidelines established in OMB Circular 110 and the District Purchasing Policy when procuring items or services for District business. These guidelines establish procedures that include, but are not limited to the following requirements (1) procure only those items, which are required to perform the mission and/or fill a bona fide need of the District, and (2) procurement will be made with complete impartiality based strictly on the merits of supplier proposals and applicable related considerations such as delivery, quantity, etc. In addition, the Board(s) and designated District personnel are responsible for adhering to the following standards of conduct as follows: (1) No employee, officer, member of the United Board of Health, the Coastal Health & Wellness Governing Board or agent of the District will participate in the selection or award or administration of a contract if a conflict of interest, real or apparent, would be involved, and (2) Members of the Board of Health or Coastal Health & Wellness Governing Board, officers, employees, or agents of the District will neither solicit nor accept gratuities, favors or anything of monetary value from contractors or potential contractors or parties to sub-agreements.

**Investment Procedures**
It is the policy of the District to invest public funds in a manner which will provide the highest investment return with the maximum security while meeting the daily cash flow demands of the entity and conforming to all state and local statutes governing the investment of public funds. Investment of Health District funds will follow procedures outlined in District Investment Guidelines.
Purpose: To define, categorize, record, track, dispose and/or transfer Health District assets according to federal, state and local requirements.

**Definition:**

Fixed Assets are defined as:

Tangible, non-expendable, personal property with an acquisition cost of more than $5,000 and a useful life of more than one year is considered depreciable equipment. Certain types of property with acquisition cost of $500 or more, but less than $5000 (such as computers, software, printers, PDA’s, scanners, laptops, video players/recorders, cameras, emergency management equipment, communication devices, medical and laboratory equipment, and media equipment) will be considered fixed assets for inventory tracking purposes although they are not depreciable. In addition, other items, regardless of acquisition cost, will be tracked/inventoried as deemed necessary and as directed by Executive officers.

Acquisition cost is the net invoice unit price of an item of equipment, including the cost of any necessary modifications, attachments, set-up fees, shipping and handling costs, or auxiliary apparatus necessary to make the property usable for the purpose for which it was acquired.

**Categories:**

Assets will be classified according to the following categories:

A. **Depreciable Equipment**

Property with an acquisition cost of $5,000 or more will be classified as a depreciable asset. These assets will be tagged, inventoried, and coded to the appropriate Capital Expenditure Account in the Fixed Asset Account Group.

1. A separate schedule will be kept for these items for purpose of GASB #34 compliance.
2. This schedule will reflect cost, expected life, salvage value and straight-line depreciation.

B. **Grant and Donated Equipment**

Property funded by grants and donated property will be kept on a separate schedule according to the parameters designated by the donating agency or grantor. These items will be tagged, inventoried, and recorded in the general ledger as expendable equipment.

C. **Non-Depreciable Equipment**

Assets in this category have an acquisition cost of $500 or more but less than $5000 and will be tagged for inventory purposes, but will not be considered as depreciable assets under GASB 34 Guidelines. Items in this category include:

- Desktop and laptop computers (including notebooks, tablets, and similar devices)
- All printers
- Emergency management equipment
- Communication devices and systems as such but not limited to Fax machines, cellular/mobile telephones, hand-held radios, telecopiers
- Medical and Laboratory equipment
• Media equipment, such as but not limited to video recorders, cameras, CD players, TVs, camcorders, DVD players

D. **Other**

Other property not meeting criteria above will be tracked/inventoried as deemed necessary and as directed by Executive Management. This includes, but is not limited to, leased equipment and mobile radios.

**Record keeping:**

Procedures for Acquisition of Property:

1) Requests for property acquisitions will be submitted and purchased according to the requirements set forth in the Galveston County Health District Purchasing policy.
2) Upon receipt of the asset (whether purchased or donated), the property will be classified in accordance with the asset categories and, if required, assigned an asset number, given an asset tag and QR code sticker, and entered into Asset Tiger software by Purchasing.
3) Asset is reserved in Asset Tiger for end user and is delivered to ordering department by IT (if IT-related asset) or Purchasing (if non-IT asset).
4) During deployment, asset custodian will verify asset information and “audit” asset in Asset Tiger. By completing the audit, the Asset Custodian is assuming responsibility for the asset.
5) Assets with a cost of $5,000 or more will be depreciated based on the estimated useful life and salvage value, using straight line depreciation and will be recorded along with the fixed assets in the Fixed Asset Account Group. The basis for Depreciation shall be based on the following guidelines:
   - Computer hardware and Software – 3 to 5 years
   - Operating Equipment – 7 to 10 years
   - Vehicles – 7 years

**Purchasing Responsibilities:**

• Responsible for purchasing approved equipment requests.
• Assignment of asset numbers as required by the Asset Classification Guidelines and application of asset tags and QR code stickers.
• Document all required information in Asset Tiger
• Deploy non-IT assets to ordering department.

**Information Technology Responsibilities:**

• Test, setup and prepare IT-related assets for deployment
• Deploy IT-related assets to ordering department.

**Accounting Responsibilities:**

• Confirmation that all property has been classified according to appropriate capitalization guidelines with proper reflection in the General Ledger.
• Oversee maintenance of all property in Asset Tiger software and reconciliation to the Subsidiary ledger with the following information:
   - Asset Number
   - Description of Property/Equipment
   - Serial number or other identification numbers (if available)
   - Source (Vendor or Donor)
   - Manufacturer
   - Acquisition date
   - Cost
- Purchase order number
- Location

- Calculation of depreciation of assets with an acquisition cost of $5,000 or greater.
- Preparation of forms as required by grant agencies, including Form GC-11: “Non-Expendable Personal Property”.
- Preparation of end of year reporting, including schedules of acquisition, disposal, and depreciation of capital assets.

Program Area Responsibilities:

- All managers and/or their designee have the primary responsibility for ensuring protective custody, and accounting for all assets assigned to their area.
- Managers will designate one employee to serve as the Asset Custodian for that program area. The person assigned should be generally familiar with assets used in that area, and will be responsible for maintaining and monitoring fixed asset records within that program area.
- Asset Custodian will audit all new deployed assets in Asset Tiger to assume responsibility of asset.

Tracking Procedures:

1) Inventory reports from Asset Tiger of all assets assigned to program areas will be reviewed and verified quarterly by department supervisor and/or designated Asset Custodian. Any discrepancies should be reported to Fixed Asset Accountant for review and reconciliation of asset records.
2) Physical inventory of all tagged assets will be performed on an annual basis by Accounting.

Accounting Responsibilities:

- Annual physical inventory will be performed and recorded of all tagged assets.
- Discrepancies reported or found through physical inventory will be reviewed and recorded accordingly.
- Fixed Asset Accountant will alert Asset Custodians of quarterly inventory due dates and will verify that all assets have been audited and recorded properly in Asset Tiger.

Program Area Responsibilities:

- Program managers and/or assigned Asset Custodians are responsible for quarterly verification of inventory reports in Asset Tiger and ensuring that all listed assets are in the program area as reported.
- Discrepancies should be reported directly to Fixed Asset Accountant.

Transfer and Disposal of Assets:

Transfer or disposal of grant assets must have approval from the Budget & Grant Manager and the grant authority prior to transfer or disposal.

Asset Transfer Procedures:

1) The interdepartmental transfer of any fixed asset must be documented with a Transfer of Asset form and approved by program managers, prior to the transfer of the asset.
2) The transferring Asset Custodian will prepare the transfer form, If the asset is IT-related, IT will deploy the asset. All other assets will be deployed by Purchasing.
Once deployed, the receiving Asset Custodian will sign and email the form to the Fixed Asset Accountant. The Fixed Asset Accountant will verify the form is complete and upload into Asset Tiger.

Asset Disposal Procedures:

1) Disposals of assets must be documented on the Asset Disposal Form and must be approved by the Chief Executive Officer, Chief Financial Officer, or designee prior to disposal.
2) Once all appropriate signatures have been obtained, the Asset Disposal form should be forwarded to the Fixed Asset Accountant who will verify that all mandatory fields have been completed. After verified, asset forms will be forwarded to Procurement Agent. If applicable, disposal forms for IT equipment will be routed to IT Manager.
3) The Procurement Agent will consult with Program Manager or IT Manager for IT equipment on the status of the item to determine how asset should be disposed, such as auctioned, discarded, donated or sold. **Note: IT Manager will ensure all data is removed from computer storage devices prior to disposal.**
   i. If an asset is to be auctioned, Purchasing Procurement Agent will make arrangements for it to be auctioned. Information will be provided to Accounting after the asset is auctioned regarding date of auction and amount received.
   ii. If an asset is to be discarded, Procurement Agent will make arrangements for item to be discarded and information regarding date of disposal will be provided to Accounting.
4) Upon final disposal of an asset, the Procurement Agent signs the disposal form and will forward it to the Fixed Asset Accountant.
5) The Fixed Asset Accountant will upload the disposal form and change the asset status in Asset Tiger.
6) When items acquired under a grant are no longer needed for the original project or program or for other activities currently or previously supported by a Federal agency, Accounting will request disposition instruction from the awarding agency. The instructions should indicate whether the District will retain title, sell the property and compensate the awarding agency, or transfer the title to a third designated/approved by the awarding agency.
7) Lost or stolen property must be reported immediately to the Risk and Safety Coordinator and asset disposal form completed.

Purchasing Responsibilities:

- Procurement Agent will be responsible for working with Program Manager or IT Manager to determine how asset will be disposed and for making arrangements for disposal of assets.
- When an item is disposed, Procurement Agent will forward completed disposal form to Accounting and provide information to Accounting regarding disposal date and amount received for auctioned or sold items.

Accounting Responsibilities:

- Fixed Asset Accountant is responsible for ensuring that all transfers and disposals are recorded in the Asset Tiger and that necessary documentation is provided to reflect a transfer or disposal.
- Appropriate adjustments will be made on the depreciation schedule and fixed asset reports.
- Upon receipt of disposal form from Purchasing, it will be verified with Asset Custodian that asset has been disposed.
• Ensure that the auction proceeds are recorded appropriately.

**Program Area Responsibilities:**

• Program area asset custodians are responsible for completing the *Transfer and Asset Disposal Form* and obtaining approval.
• The Program Manager will work with the Procurement Agent to determine if an asset should be discarded or auctioned.

**Information Technology Responsibilities**

• Ensure all data is removed from computer storage devices prior to transfer or disposal.
• IT Manager will work with Procurement Agent to determine how IT equipment will be disposed.
Galveston County Health District
Travel Procedures

Purpose

To define and establish guidelines on procedures and reimbursable expenses while traveling on District business.

Definitions

District business includes business activities related to all District funds and programs.

Local travel is travel for a specific day, within Galveston County and the adjacent counties. (Harris, Brazoria and Chambers counties)

Out of Town travel is travel for more than one day and is outside Galveston County and the adjacent counties. (Harris, Brazoria and Chambers counties)

Per Diem is the standard meal allowance and incidental expenses allowed for out of town travel.

Incidental Expenses include all tips given such as those for transportation, meals, concierge, etc.

Mileage is reimbursed to employees who use their personal vehicle for company business.

Overview

Employees will utilize the most economical and effective means of transportation, hotel and meals available on an overall, total trip cost basis. Savings from an inexpensive travel itinerary may more than be offset by excessive travel time which keeps employees away from normal District duties. Saving a few dollars on airline tickets is not warranted if employees must leave a day early and the cost of the employee’s salary for that day exceeds the airline ticket savings. Hotel shuttles are preferred over ride sharing services such as UBER, ride sharing over taxis, and taxis over rental cars, etc.

Out of Town Travel

Requests for out of town travel are submitted on a Request for Travel form. A copy of the conference agenda must be included with the Travel form. The Travel form shall include justification for travel and identify the estimated cost for the trip, including:

- Registration fees
- Hotel
- Air fare
- Personal auto usage
- Parking
- Shuttle
- Meals
- Incidentals
Out of Town travel requests must be approved in advance by your immediate Supervisor who must also verify that adequate travel funds are available. The approved Request for Travel form should then be sent to Accounting at least 10 work days before departure date for employees requesting an advance.

Upon completion of travel, a copy of the Travel form shall be updated and submitted with receipts for approval within 5 working days to Accounts Payable. If actual expenses exceed estimated expenses, payment of the excess charges will only be made after approval by Accounting, and if there are additional unobligated travel funds available. EMS transports require an EMS Transport Expense form. See paragraph related to specific issues regarding GAAA Transport for further details.

**Allowable Travel Expenses**

Reimbursable expenses must be reasonable and normal for the area. “Local travel” is reimbursable only for mileage, parking and tolls (details below).

The following examples are representative of allowable expenses:

- Hotel rooms including the night before where morning travel is not reasonable. (minus sales tax)
- Per Diem (details below) - will be reimbursed based on travel time and the start and end time of the event.
- Baggage storage fees
- Long-term airport parking
- Mileage from employee’s home to airport and return
- Tolls (receipt needed)
- Regular hotel guest (self) parking - less sales tax

**Travel Advances**

Employees are encouraged to pay for their trips using their personal funds to be reimbursed afterwards, or employees may request a cash advance. If requesting a cash advance, employees must still book the hotel using their personal credit card. If employee does not have the means to book the hotel, a district card will be used. However, the employee must use their cash advance to pay for the hotel upon checkout.

Cash advances must be submitted on the Request for Travel form. The Travel form must be submitted to the employee’s supervisor at least 3 weeks prior to travel dates. If an employee is requesting an advance, the Travel form will be then be forwarded to Accounts Payable at least 10 work days before the departure date for employees requesting an advance. After travel is complete, the updated form showing actual expenses should be re-submitted and processed within 5 working days. Additional travel cash advance requests will not be approved until all previous advances have been turned in for reconciliation.

**Hotels**

The District encourages the use of clean, comfortable and safe hotels but expects that the employee will be frugal in selecting a hotel. Government rates should be utilized whenever available. The use of concierge to store baggage is encouraged in order to avoid late checkout charges. Use of hotel shuttles or buses is also encouraged in order to minimize transportation costs. Arrival one night before morning meetings or conferences is acceptable whenever same day travel is not reasonable. Arrival the day of the meeting or conference is encouraged whenever the meeting or conference does not begin before 10:00 AM. Return the same day that the conference or
meeting ends is expected except where reasonable connections will not assure arrival at a Houston area airport before 10:00 PM. Valet parking will not be reimbursed, unless it is the only available option. State sales tax charged on Hotels and parking will not be reimbursed. *It is the employee’s responsibility to obtain a tax-exempt certificate from Accounts Payable prior to traveling and ensure that the hotel does not charge sales tax. The form is included with the Travel Form online.* Please note that the District is not exempt from occupancy taxes and should be charged accordingly.

**Air Fare**

Travel by air is acceptable whenever travel by car is longer than three hours or less expensive than travel by car. Submit an *Air Travel Request* form to your immediate supervisor for approval in order to request air travel. Once approved, your immediate supervisor must submit the form to the Controller for approval.

Once the *Air Travel Request* is approved, employees may make their own flight arrangements or request that Accounts Payable do so on their behalf using the District credit card.

Flights will be scheduled based on the information filled out on the form. Once the flight has been scheduled, a confirmation will be sent to the employee with the flight information. If confirmation has not been received within one week of submittal, please contact Accounts Payable.

Travel/training requests involving air travel should be submitted, if possible, for approval at least 3 weeks prior to the event to ensure timely payment and flight availability.

**Rental Cars**

Hotel shuttle buses, ride sharing services (UBER, etc.) and taxis, in that order, are the preferable means of transportation when out-of-town. Where these options are impractical or uneconomical, use of a rental car may be justified. The employee should purchase the extra vehicle insurance at their discretion. The District will not reimburse the employee for this insurance charge. However, employees who do not have personal car liability insurance are required to purchase the extra vehicle insurance. The employee should ensure that the vehicle is returned with a full tank of gas. Fuel and other receipts should be retained along with the vehicle receipt for reimbursement. The use of an economy car for one person, a mid-size for two and a full-size for three or more is recommended. The use of SUV, vans or other specialty vehicles requires special justification.

**Meals**

The District has determined that “Out-of-Town” meals and associated gratuities should be paid on a per diem basis following the most current GSA standard rate (https://www.gsa.gov/travel/plan-book/per-diem-rates). The employee is not required to keep receipts to document the cost of these meals. Per diem allowance will be prorated for partial days. Travel beginning before noon will receive a full per diem; travel beginning after noon will receive partial per diem. Return travel completed before 5:00 PM will receive partial per diem and travel completed after 5:00 PM will receive full per diem. Meal tips are included in the per diem rate and should not be reported separately. Sales tax will not be reimbursed.

Whenever meals are included in a conference or event, employees are expected to use the furnished meals and the per diem rate will be reduced by the applicable per diem amount for each event meal. The *Travel Form* should not include per diem amounts for meals provided by a conference/meeting as stated on the Agenda. Meals will not be paid for local travel. Alcoholic beverages will not be reimbursed.
Use of Personal Vehicles

The use of personal vehicles for District business travel is acceptable whenever a District vehicle cannot effectively be utilized. The District does not insure private vehicles so each employee is responsible to determine whether his personal automobile insurance policy coverage is adequate. Damage to the vehicle, vehicle repairs, parking fines, towing charges and theft of property are the responsibility of the employee, not the District. Mileage will be determined using Mapquest (www.mapquest.com) or Google Maps (www.google.com/maps), or other online systems and reimbursed at the current IRS rate. Allowable travel expenses will be reimbursable for required travel that is being funded through a grant. In addition to mileage reimbursement, with appropriate receipts, the District will reimburse parking and tolls incurred in the course and scope of District business, less sales tax.

Mileage will be computed from the employee’s home or the regular work site whichever is closest to the destination unless a mid-day departure necessitates leaving from their work site. If this is the case, please denote this on the travel form.

Mileage/Local Travel

Mileage for Local Travel shall be reported on Local Mileage forms if it is not included with a Travel form. (This is typically from a training event or conference that does not meet the definition of Out of Town travel.) Mileage is reimbursed at the current IRS mileage rate. The Local Mileage form is also used to request reimbursement for personal vehicles being driven for District business. Mileage forms should be completed electronically indicating the date, starting point, ending point, purpose of trip and cost center. Forms with appropriate signatures and back-up are due to Accounts Payable no later than the 5th working day of the following month. Mileage should be submitted in a timely manner. Waiting to turn in mileage several months later causes significant problems with budgeting and grant reimbursements. Recurring late submission of mileage will result in disciplinary actions.

Other expectations regarding mileage reimbursement are:

- A print-out from MapQuest or Google Maps should be attached to the Local Mileage form for each business trip in which mileage is being claimed. Each trip should be listed separately and should include total mileage to and from each destination.
- For addresses not found on MapQuest or Google Maps, vehicle odometer should be used to indicate mileage for that trip. Documentation should be attached to indicate that the address was not found.
- The standard mileage list on the Local Mileage form is for District sites only. No maps are required when going to and from District sites.
- No mileage is claimed for lunch or other personal related travel throughout the workday.
- Local mileage at the beginning of the workday starts at the office if the work day begins at the office. However, if staff has been given approval to start in the field, mileage begins at the first work stop. Accordingly, local mileage at the end of the work day ends either at the office or at the last work stop in the field, as appropriate.
- For after hours or weekend callouts, mileage begins from your present location to your destination and back.
- In the case of travel out of county starting or ending from home address, the home address should be used if it is less that the starting/ending address of the regular work site.
- Significant changes in mileage related to weather or construction detours should be explained and odometer readings provided.
**Taxi, Hotel Shuttle, Public Transportation**

Hotel shuttle service is the preferred method of travel at out-of-town locations where available. Round trip service is available at most airports to the major hotels in the area. Whenever hotel shuttle service is not available because of late arrival or an unusual destination, use of a taxi or ride sharing service (Uber) is acceptable. Receipts should be retained to document this expense.

**Incidental Expenses**

The District will reimburse for reasonable incidental expenses necessitated by a long trip. Customary hotel and transportation tips will be reimbursed.

**Expenses Not Reimbursed**

*Examples, not all-inclusive:*

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Movie charges</td>
<td>Room service</td>
</tr>
<tr>
<td>Spas</td>
<td>Health club</td>
</tr>
<tr>
<td>Room bars</td>
<td>Limousines</td>
</tr>
<tr>
<td>Luxury rental cars</td>
<td>Refueling charges by rental car companies</td>
</tr>
<tr>
<td>Optional insurance</td>
<td>Entertainment expenses</td>
</tr>
<tr>
<td>Personal items</td>
<td>Medication or doctor’s visits</td>
</tr>
<tr>
<td>Valet parking</td>
<td>Sales Tax</td>
</tr>
<tr>
<td>Alcoholic beverages</td>
<td>Dry Cleaning</td>
</tr>
</tbody>
</table>

**Special Directives specific to GAAA/EMS TRANSPORTS**

Transports do require the completion of an *EMS Transport Expense* form before each scheduled or non-scheduled Transport. Part one of the form must be filled out prior to leaving and must be signed by the Supervisor on duty. A District debit card or gas card for gas purchases may be checked out prior to the Transport. This card must be recorded on the Log Sheet. Itemized receipts for purchase(s) made on District cards must be provided with the *EMS Transport Expense* form upon return of the transport. See specific guidelines for Meals and Lodging as outlined in these guidelines.

Upon return of the Transport, crew members shall complete part two of the form. It shall be signed by all crew members involved in the transport as well as the supervisor on duty. The supervisor on duty shall ensure that all charges have been listed and an itemized receipt attached to the *EMS Transport Expense* form. For reimbursement of personal funds used, the *Request for Travel/Reimbursement* form must be completed as stated in guidelines. All forms shall then be forwarded to Accounts Payable.
Name:_________________________ Dept:________________ Date(s):________________________

Program to be charged:_________________________ Destination:________________________

Account Coding:_________________________

Purpose of travel (Attach copy of agenda or schedule):____________________________________

Transportation: Air ☐ Own Auto ☐ Train ☐ Bus ☐ Other (specify)__________________________

Ride w/ another attendee (List name(s))__________________________________________________

Transportation by Air must have Air Travel Request form attached

Estimated mileage requested (including to/from airport) _______________ X _______ = $ _________

Date of departure from home/office: __________________ Time: __________________

Date of return from home/office: __________________ Time: __________________

Per diem request (food and incidentals): $____ Hotel request: $_____ per night x ______ nights

Other (Specify): $ ________________ Registration: $ ________________

Signature:_________________________ Date____________ Program Mgr Signature:____________ Date______

Advanced Requested $_______________ Prepayment Requested $ _________________

No Advance or prepayment request will be authorized unless the “Request for travel form and all supporting documentation is received by Administration 10 work days prior to the date of the event

BELOW FOR ACCOUNTING USE ONLY

Advance Approved: $_____________ Prepayment Approved: $________

Fare: __________ Mileage: ______ miles @ $____ Per Diem: __________

Hotel: ______ nights @ $____ Registration: $________ Other: __________

Total Advance Approved: $________ Total Prepayment Approved: $________

_________________________________________ __________________________
Administrator Date
EMS Transport Expense Form

Section I (To be completed prior to transport)

<table>
<thead>
<tr>
<th>Date of Run:</th>
<th>Origination:</th>
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</thead>
<tbody>
<tr>
<td>Est Depart Time:</td>
<td>Est Return Time:</td>
</tr>
<tr>
<td>Mileage:</td>
<td></td>
</tr>
</tbody>
</table>

Method of Payment for Travel Expenses:
- [ ] CitiBank Card
- [ ] Personal Funds

Crew Members:

Approval of Transport by Supervisor on Duty: ____________________________
Signature and Date

Section II (To be completed at completion of transport)

<table>
<thead>
<tr>
<th>Date</th>
<th>(Fuel, Meal, Lodging)</th>
<th>Business Name</th>
<th>Location</th>
<th>Amount</th>
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<tbody>
<tr>
<td></td>
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</table>

Crew Member Signature ______ Date ______

Crew Member Signature ______ Date ______

Crew Member Signature ______ Date ______

Note: Itemized Receipts must be attached

Approval of Supervisor on Duty ______ Date ______
INVESTMENT GUIDELINES

Audience

This policy applies to Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”).

Policy

It is the policy of the District to invest public funds in a manner which will provide the highest investment return with the maximum security while meeting the daily cash flow demands of the entity and conforming to all state and local statutes governing the investment of public funds.

Scope

This policy includes all short-term and long-term operating funds governed by the United Board of Health and Coastal Health & Wellness Governing Board.

Pooling of Funds - Except for cash in certain restricted and special funds, the District will consolidate cash balances from all funds to maximize investment earnings. Investment income will be allocated to the various funds based on their respective participation and in accordance with generally accepted accounting principles.

Objective

The primary objective, in order of priority, shall be:

- Legality – conformance with federal, state and other legal requirements
- Safety – preservation of capital and protection of investment principal
- Liquidity – maintenance of sufficient liquidity to meet operating requirements
- Yield – attainment of market rates of return

The portfolio should be reviewed periodically as to its effectiveness in meeting the entity’s needs for safety, liquidity, rate of return, diversification and its general performance.

Delegation of Authority

Management and administrative responsibility for the investment program is hereby delegated to the CEO and Chief Financial Officer who, under the delegation of the appropriate Finance Committees and Boards, shall establish written procedures for the operation of the investment program.
Ethics and Conflict of Interest

District employees and/or Board members involved in the investment process shall refrain from personal business activity that could conflict with the proper execution and management of the investment program, or that could impair their ability to make impartial decisions.

Authorized Financial Dealers and Institutions

The Chief Financial Officer will maintain a list of financial institutions authorized to provide investment services.

In addition, a list will also be maintained of approved security brokers/dealers selected by credit worthiness (e.g., a minimum capital requirement of $10,000,000 and at least five years of operation). All financial institutions and broker/dealers who desire to become qualified for investment transactions must supply the following as appropriate:

- Audited financial statements
- Proof of National Association of Securities Dealers (NASD) certification
- Proof of state registration
- Completed broker/dealer questionnaire
- Certification of having read and understood and agreeing to comply with the District’s investment policy.

Competitive bids should be obtained from at least two brokers or financial institutions on all purchases of investment instruments purchased on the secondary market.

Authorized and Suitable Investments

Investments may be made in any type of security consistent with state and local laws governing the investment of public funds. Investments shall be made that reflect the cash flow needs of the fund type being invested, and include, but are not limited to the following:

- Certificates of deposit and other evidences of deposit at financial institutions; and
- Money market mutual funds regulated by the Securities and Exchange Commission and whose portfolios consist only of dollar-denominated securities
- US Treasury obligations which carry the full faith and credit guarantee of the United States government and are considered to be the most secure instruments available;
- US government agency and instrumentality obligations that have a liquid market with a readily determinable market value; and
- Local government investment pools either state-administered or developed through joint powers, statutes and other intergovernmental agreement legislation.
Collateralization

Funds on deposit (checking accounts, certificates of deposit, etc.) in excess of FDIC limits must be secured by some form of collateral, witnessed by a written agreement and held at an independent – third party institution in the name of the municipality.

Investment Parameters

The District shall diversify its investments to the best of its ability based on the type of funds invested and the cash flow needs of those funds. The following diversification limitations shall be imposed on the portfolio:

*Maturity* – No more than 50% of the portfolio may be invested beyond 12 months, and the weighted average maturity of the portfolio shall never exceed one year. Unless matched with a specific cash flow, the District will not directly invest in securities maturing more than five (5) years from the date of purchase or in accordance with state and local statutes and ordinances. The District shall adopt weighted average maturity limitations (which often range from 90 days to 3 years), consistent with the investment objectives.

*Default Risk* – No more than 25% of the overall portfolio may be invested in the securities of a single issuer, except for US Treasury securities, Federal Agency issues, and authorized pools.

*Liquidity Risk* – At least 50% of the portfolio shall be invested in overnight instruments or in marketable securities which can be sold to raise cash in one day’s notice.

Safekeeping and Custody

All trades where applicable will be executed by delivery vs. payment (DVP) to ensure that securities are deposited in an eligible financial institution prior to the release of funds. Securities will be held by a third-party custodian designated by the management of the District and evidenced by safekeeping receipts and a written custodial agreement.

Internal Control

Designated District staff are responsible for establishing and maintaining an internal control structure designed to ensure that the assets of the entity are protected from loss, theft or misuse. The internal control structure shall be designed to provide reasonable assurance that these objectives are met. The internal controls shall address the following points:

- Control of collusion
- Separation of transaction authority from accounting
- Custodial safekeeping
- Written confirmation of telephone transactions for investments and wire transfers
**Reporting**

The Chief Financial Officer shall prepare an investment report at least quarterly, including a management summary that provides an analysis of the status of the current investment portfolio and transactions made over the last quarter, and market value of the portfolio. This management summary will be prepared in a manner which will allow District staff, Boards and Finance Committees to evaluate performance standards and ascertain as to whether investment activities during the reporting period have conformed to the investment policy.

**Policy Considerations**

These guidelines shall be reviewed by the Finance Committees on an annual basis in conjunction with the Fiscal Management policy. Any changes must be approved by the United Board of Health and Coastal Health & Wellness Governing Board, as well as the designated District staff who are charged with maintaining internal controls.
Anti-Fraud Policy

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

Purpose
The purpose of this policy is to provide guidelines and controls to aid in the prevention, deterrence, and detection of fraud, theft, waste, or abuse against the District. This policy expands upon the District’s “Employee Ethics, Standards of Conduct, & Conflict of Interest Policy,” and outlines more specific responsibilities and expectations related to fraud. In addition, it is the intent of this policy to comply with federal whistleblower protection rights and remedies under 41 U.S.C. § 4712, and the Texas Whistleblower Act as codified under §554.001 of the Texas Government Code.

Definitions and Examples of Fraud, Theft, Waste, and Abuse
Fraud is defined as an intentional deception designed to obtain a benefit or advantage, or to cause some benefit that is due to be denied. Examples of fraud include, but are not limited to:

- Any dishonest or fraudulent act;
- Impropriety in the handling or reporting of money or financial transactions;
- Forgery or alteration of any document or account belonging to the District (e.g. checks, timesheets, invoices, contractor agreements, bid documents, purchase orders, electronic files, and other financial documents);
- Misrepresentation of financial reports;
- Misappropriation of funds, securities, supplies, inventory, or any other asset including furniture, computers, fixtures or equipment;
- Authorizing or receiving payments for hours not worked;
- Disclosing confidential and proprietary information to outside parties;
- Accepting or seeking anything of material value from contractors, vendors, or persons providing services/materials to the District that may be construed to be an attempt to influence the performance of an employee’s official duty in the scope of employment for the District; and
- Destruction, removal, or inappropriate use of records, furniture, fixtures and equipment.

Theft is defined as the act of taking something from someone unlawfully. An example of theft is taking home a printer belonging to the District and retaining it for personal use.

Waste is the loss or misuse of District resources that results from deficient practices, system controls, or decisions. An example of waste is incurring a late fee when registering for a conference due to an oversight or lack of attention.
Abuse is the intentional, wrongful, or improper use of resources, or misuse of rank, position, or authority which causes the loss or misuse of resources, such as tools, vehicles, computers, copy machines, etc. An example of abuse would be using District equipment or supplies to conduct personal business.

Policy
The District’s Anti-Fraud policy is designed to promote consistent, legal, and ethical organizational behavior by:
- Assigning responsibility for reporting fraud, theft, waste and/or abuse;
- Providing guidelines to conduct investigations of suspected fraudulent behavior; and
- Making anti-fraud awareness training available annually.

Whistleblowing
The District firmly stands behind its policy declaring that employees will not be discharged, demoted or otherwise discriminated against in retaliation for whistleblowing, so long as it is performed in good faith. In addition, whistleblower rights and remedies cannot be waived by any agreement, policy, form, or condition of employment.

Whistleblowing is disclosing information that the employee reasonably believes in good faith is evidence of the following:
- Gross mismanagement of a federal or state issued contract or grant;
- Gross waste of federal, state or county funds;
- Abuse of authority relating to a federal or state issued contract or grant;
- Substantial and specific danger to public health or safety; and/or
- Violation of a law, rule, or regulation related to a federal or state issued contract or grant (including the competition for, or negation of the contract or grant).

In accordance with state or federal law, a District employee may be required to disclose the fraud, waste, or abuse to one of the following individuals:
- A member of Congress or a representative of a congressional committee;
- An inspector general;
- A government accountability office;
- A federal, state or county employee responsible for contract or grant oversight or management at the relevant agency;
- An official from the Department of Justice or other law enforcement agency;
- A court or grand jury; or
- A management official or other employee of the contractor or grantee who has responsibility to investigate, discover or address misconduct.

Responsibility to Report Suspected Fraud
Each employee is required to report any suspected fraud, theft, waste, abuse or other dishonest conduct to the Chief Compliance Officer and/or the Human Resources Director. Supervisors are required to report suspected fraud, theft, waste, abuse or other dishonest conduct, including reports from employees or other individuals, to the Chief Compliance Officer and/or the Human Resources Director.

The identity of an employee or complainant who, in good faith, reports suspected fraud will be protected to the fullest extent allowed by law. Suspected improprieties and/or misconduct concerning an
employee's ethical conduct should be reported to the Chief Compliance Officer and/or Human Resources Director. All employees are responsible for the detection and prevention of fraud, misappropriations, and other irregularities. Each administrator shall be familiar with the types of improprieties that might occur within his or her designated area of responsibility, and shall remain alert for any indication of fraud. Any fraud that is detected or suspected must be reported immediately to the Chief Compliance Officer and/or Human Resources Director, and an internal investigation may subsequently commence. All employees will be held accountable to act within the District’s official “Code of Conduct,” which maintains that no form of fraud, theft, waste or abuse shall be tolerated.

A whistleblower who believes he/she is being retaliated against for making a report of suspected fraud should contact the Chief Compliance Officer or Human Resources Director immediately. A whistleblower who believes that he/she is being retaliated against may additionally contact an authoritative official or manager of the external oversight agency involved.

Guidelines for Handling a Report of Suspected Fraud, Theft, Waste, or Abuse
Whether the initial report is made to an employee’s supervisor, the Chief Compliance Officer, and/or Human Resources Director, the reporting employee/individual should immediately be instructed to:

- Not contact the suspected individual in an effort to determine facts or demand restitution;
- Refrain from further investigating the allegations;
- Observe strict confidentiality by not discussing the case, facts, suspicions, or allegations with anyone unless specifically asked to do so by the Chief Compliance Officer and/or Human Resources Director;
- Report any form of retaliation against him/her concerning report of the suspected fraudulent activity; and
- Understand that the identity of an employee or other individual who reports a suspected act of fraud will be protected as provided by this policy.

Investigation of Complaints
The Chief Compliance Officer and/or Human Resources Director will promptly initiate an investigation into any allegation of fraud, theft, waste or abuse. The Chief Compliance Officer and/or Human Resources Director will make every reasonable effort to determine the facts pertinent to the complaint.

The investigation may include, but is not limited to, interviews with witnesses and discussions with involved parties. During the course of the investigation, the alleged perpetrator may be placed on paid administrative leave to allow for the investigator to work unimpeded. All investigations of fraud, theft, waste or abuse complaints shall be conducted as discreetly as possible. Upon conclusion of the investigation, the Chief Compliance Officer, the Human Resources Director and the employee’s supervisor will convene to discuss the investigation’s results and next steps.

The Chief Compliance Officer, Human Resources Director or other designated investigator shall make every effort to protect the rights and the reputations of everyone involved in a report of suspected fraud, including the individual who in good faith alleges perceived misconduct, as well as the alleged violator(s).
If findings support the accused employee was in violation of this policy, that employee shall be subject to disciplinary action up to and including termination.

**Whistleblower Remedies**

In accordance with state law, if a good faith whistleblower is subjected to retaliation, any of the following remedies on behalf of the whistleblower may be enacted (or done so by his/her representative):

- Action to stop the reprisal;
- Action to reinstate the whistleblower to the position held prior to the reprisal, together with compensatory damages (including back-pay), employment benefits, and other terms and conditions of employment that would apply to the person in that position if the reprisal had not been taken; and/or
- The provision of monetary compensation issued to the whistleblower in an amount equal to the total amount of all costs and expenses (including attorneys' fees and expert witnesses' fees) that were reasonably incurred by the whistleblower for bringing forth the complaint regarding the reprisal.

If relief is denied, the employee has the right to file a complaint in state or federal court (whichever venue is applicable under the circumstances) against the District for compensatory damages and other available relief.

**Quarterly Compliance Report**

Investigated incidents of suspected fraud shall be reported to District boards on a quarterly basis. The Compliance Report may include information including, but not limited to, the circumstances that triggered the investigation, the outcome of the investigation, and subsequent corrective action(s) enacted.

**Violations and Corrective Actions**

Employees who violate the "Anti-Fraud Policy" and/or related procedures will be subjected to corrective action up to and including termination, in accordance with the District’s "Corrective Action Policy."

An employee who has engaged in any form of fraud, waste, or abuse; suspects or discovers fraudulent activity and fails to report his or her suspicions as required by this policy; or who intentionally reports false or misleading information is subject to such corrective action, up to and including termination.

**Anti-Fraud Awareness Training**

The Chief Compliance Officer and/or designee will conduct employee training and/or provide training materials to District managers during in-services and/or staff meetings on an annual basis.
Drug-Free Workplace Policy

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “the District”) employees, volunteers, students, and contractors (business associates).

Policy
The District shall provide a drug-free workplace in compliance with the Drug-Free Workplace Act of 1988.

It is a violation of the Drug-Free Workplace policy to be under the influence of, or manufacture, use, possess, sell, trade, and/or offer for sale alcohol, illegal drugs, or intoxicants while representing the District, conducting District related business, during all working hours, while on District property, operating any vehicle owned by the District, and/or while present at District sponsored events.

Drug/Alcohol Testing
Prospective District employees shall be required to take a drug test AFTER a pending offer of employment. If the test returns a positive result, the pending offer shall be revoked and the candidate will receive notification of this revocation in the form of an Adverse Action letter. Prospective employees wishing to dispute a positive result may have the same sample retested at their own expense.

Employees may be required to take a “for cause” drug or alcohol test if approved by the Chief Executive Officer or designee. The Chief Executive Officer or designee may approve “for cause” drug testing on an employee if a significant complaint from the public or a coworker is received and/or if the employee’s supervisor witnesses a behavioral change in the employee which has a negative effect on the work environment.

Supervisors are responsible for contacting Human Resources immediately if it is suspected that an employee is under the influence of drugs and/or alcohol while carrying out duties of their employment.

Any employee who is operating a company owned vehicle and is involved in a vehicle accident or incident that results in damage or injury to any vehicle, personal or private property, or person, regardless of fault, will be drug and alcohol tested immediately after the incident.

To assure compliance, District executives may initiate, as needed, random drug/alcohol testing in service areas where indicated (Reference: Vehicle Accident/Incident policy).
Consequences
Any employee who tests positive for illegal substances, including prescription drugs without a valid prescription, will be terminated immediately. Employees will be subject to the same consequences of a positive drug test if he/she refuses the screening or the test, adulterates or dilutes the specimen, substitutes the specimen with that from another person, refuses to sign required forms or refuses to cooperate in the testing process in such a way that prevents accurate completion of the test.

One of the goals of the Drug-Free Workplace policy is to encourage employees to voluntarily seek help with alcohol and/or drug related problems. Disciplinary action will not be taken against an employee who proactively voluntarily identifies him/herself as a user of illegal drugs or an abuser of alcohol prior to being identified through other means, and who obtains official documented counseling and/or rehabilitation through the District’s employee assistance program (EAP), and thereafter refrains from using illegal drugs and/or alcohol abuse in accordance with the provisions of this policy.

Reporting to Outside Agencies
Should an employee hold a license or certification from a state or federal agency (i.e. RN, paramedic, M.D., D.D.O., registered sanitarian, etc.), the District shall report the positive test result to the applicable agency in accordance with rules and regulations set forth by the licensing agency.

Tobacco Use
The District is dedicated to improving the health and well-being of the communities it serves. As part of this mission, all persons including employees, volunteers, students, patients, visitors, vendors, contractors and others who appear at facilities designated for District business are prohibited from using tobacco products inside, around, or on the grounds, including, the parking lots and roadways, of any District buildings, facilities and vehicles. Tobacco products include, but are not limited to, cigarettes, cigars, pipes, and other smoking products; dip, chew, snuff and any other smokeless tobacco products; and electronic products that deliver nicotine or other substances, such as electronic cigarettes or vaporizers.

The District strongly encourages tobacco users interested in quitting to learn more about free smoking cessation support by calling 1-877-YES-QUIT, or visiting www.yesquit.org.

Assistance/Information
Employees are encouraged to make use of the District’s employee assistance program if they are concerned that they or a family member may have a drug and/or alcohol problem. Employees proactively seeking treatment through the employee assistance program will receive no sanction for seeking such assistance.

Confidentiality
Information received by the District regarding drug test results and/or an employee’s mandatory or self-referral to the employee assistance program is confidential, and such information shall be made solely to those individuals on a need-to-know basis.
Violation
Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension, with or without loss of pay, or termination. It is the intent of this policy to be in compliance with the Drug-Free Workplace Act of 1988.
Employee Assistance Program Policy

Audience/Eligibility
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
It is the District’s policy to provide an Employee Assistance Program (EAP) that provides confidential, professional assistance to help employees and/or their immediate family members to resolve problems that affect their personal lives and/or performance on the job.

Self-Referrals
Employees are encouraged to seek assistance for a personal problem by contacting the EAP before job performance is impaired. Self-referrals are confidential, and no contact is made between the EAP and supervisors. Vacation or Sick leave is to be used for any time missed from work due to a self-referral to the EAP. It is the employee’s responsibility to request supervisory approval for scheduled absences. (Reference: Attendance policy)

Mandatory Referrals
Supervisors may refer employees to the EAP based on documented deteriorating or unsatisfactory job performance. Employees with a mandatory referral to the EAP will use Administrative Leave for those appointments that occur during business hours (Reference: Employee Leave policy).

If an employee is given a mandatory referral to the EAP and does not make contact with the EAP within the allotted timeframe, or does not complete the recommended treatment plan, the employee will be terminated from the employment of the District. (Reference: Corrective Action and Employee Leave policies)

Regardless of whether the employee is referred to the EAP, the usual disciplinary procedures for poor job performance will be followed if an employee's job performance continues to be unsatisfactory.

Mandatory referrals may also apply when an employee discloses substance abuse. (Reference: Drug-free Workplace policy)

Confidentiality
Contact between the EAP and an employee or his/her immediate family member is confidential. In the case of a mandatory referral, the Release of Information signed by the employee allows Human Resources to receive a report of attendance or absence from a session. The Release of Information does not allow Human Resource to receive information regarding the nature of the visit unless, in the judgment of EAP staff, an employee represents a threat to himself or others or unless otherwise required by law. Mandatory referrals to the EAP shall be kept confidential and maintained by Human Resources separate from other personnel records.
Employee Corrective Action Policy

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
When it is determined that an employee is not meeting expectations, the most directly accountable manager is expected to take fair, consistent, appropriate, and timely corrective action.

These important factors will be considered in all applications of corrective action:

- the seriousness of the offense;
- the employee's past record; and
- the circumstances surrounding the particular case.

The procedures below may be used or skipped at any time at the approval of Human Resources and/or the Chief Executive Officer or designee.

Initial Employment Period
It is recommended that corrective action situations involving employees who are in their initial employment period be dealt with by progressive corrective action. However, an employee in their initial employment period may be immediately dismissed based on the recommendation of the supervisor and/or program director and review and approval by the Human Resources Director, Chief Executive Officer or designee.

Regular Employees
Progressive corrective action may be skipped at any time for those situations warranting immediate action, up to termination, depending on the severity of the infraction and the consequences to the public and/or organization and at the approval of Human Resources, the Chief Executive Officer or designee.

Written corrective actions are expected to be issued to the employee within one business day of the infraction and/or after the conclusion of the investigation.

Supervisors at all levels are expected to utilize the GCHD Investigation Form whenever possible to document any issue(s), investigation notes and other pertinent information to ensure conformity and consistency in the resolution of documentation. Upon resolution, the Investigation Form shall be given to Human Resources for appropriate archiving.

Four types of corrective action are recognized. These are: verbal clarification, written warning, suspension, and dismissal.

Progressive Corrective Action
**Step 1: Verbal Clarification**

When a performance problem is first identified, the supervisor is expected to thoroughly discuss the problem with the employee within one business day of the incident and/or after the conclusion of the investigation. Bringing the problem to the attention of the employee is often enough to prompt him/her to correct it willingly. The “verbal clarification” should be given to the employee in private, out of earshot of other employees.

The offending employee will be given a verbal clarification by his/her supervisor. The supervisor, for purposes of letting the employee know that it is an official warning, will state, "**This is a verbal clarification.**" The supervisor is expected to document the verbal clarification on the *District Official Discipline Notice* to maintain documentation for future reference. This documentation should be forwarded to Human Resources for filing in the employee’s personnel file.

**Step 2: Written Warning Corrective Action**

If satisfactory performance is not achieved by issuing the employee a verbal clarification, the supervisor and/or the next level of management is expected to:

(a) Promptly notify the employee that corrective action may occur immediately after an incident occurs. Let the employee know that as soon as the investigation is complete, and all relevant facts are gathered that you will meet with them to inform them of the outcome and any actions to be taken.

(b) Promptly notify the Human Resources Director of the incident and seek any guidance about facts needed.

(c) Investigate the incident by gathering all relevant facts, including the employee’s side of the incident.

(d) Within one workday of finishing the investigation:
   a. prepare a draft corrective action for review by the Human Resources Director, and  
   b. issue the approved corrective action to the employee in private allowing time for the employee to write comments.

(e) Forward the corrective action along with any supporting documentation to Human Resources for filing in the employee’s personnel file.

Written corrective actions must include the following:

(a) Complete form (or memo in some cases)

(b) Copy of the verbal clarification attached (if applicable)

(c) Statement of the policy or procedure violated or in some circumstances the job description can be attached if the employee has done something that is not on his/her approved job description (attach copy).

(d) Statement of consequences of actions (i.e. adverse impact to district, disruption of workplace, impact on GCHD credibility, adverse impact on public member(s), etc.)

(e) Clear detailed plan to correct infraction – training by whom, by when, review policy by when, etc.

(f) Statement of what will happen if the same or similar infraction occurs in the future.

**Step 3: Suspension**
If a formal discussion and written corrective action with the employee have not resulted in corrective action, the next step based on the seriousness of the offense, is suspension without pay. A suspension is time off—not to exceed 10 working days—without pay for misconduct that is not serious enough to warrant immediate dismissal. Time periods for suspensions are based on FLSA status (salary/exempt vs. hourly/non-exempt), the seriousness of the infraction, and Department of Labor guidelines and regulations.

The supervisor and/or next level of management is expected to:

(a) Complete the steps above for investigating and writing a corrective action.
(b) Work with the Human Resources Director to determine length of time employee will be suspended.
(c) Obtain all approval signatures prior to meeting with the employee.
(d) Meet in private with the employee to review the areas of concern and issue the suspension (ensure that employee is aware of when to return to work and that the suspension is without pay).
(e) Inform the employee that his/her job is in jeopardy and that failure to correct the problem will result in further action which may include termination of employment.
(f) Meet with the employee upon his/her return to review the corrective action plan.
(g) Forward the corrective action along with any supporting documentation to Human Resources for filing in the employee’s personnel file.

Step 4: Dismissal
Based on the seriousness of the offense, the employee's past record, and the circumstances surrounding the particular case, the supervisor can initiate the termination process by documenting, in writing, the reasons for dismissal and the steps that have been taken to correct the problem.

The supervisor and/or next level of management is expected to:

(a) Schedule a meeting with the Human Resources Director to discuss if dismissal is appropriate.
(b) Assist the Human Resources Director in developing a chronology of the employee’s personnel file (to include verbal clarifications, corrective actions, personnel evaluations, etc.).
(c) Upon approval to proceed with the termination process from the Human Resources Director, Chief Executive Officer or designee, assist the Human Resources Director in drafting a termination notice for the signature of the Director level manager. The termination notice will include:
   - the reason(s) for the action,
   - the effective date, and
   - signature of the Director level manager
(d) Meet with the employee in private to issue the termination notice.

Situations Warranting Immediate Dismissal

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Deleted: c®®the employee’s right to rebut the allegations in writing within 3 working days to the Chief Executive Officer, CHW Clinical Director, or designee. ¶
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Deleted: The Chief Executive Officer, CHW Clinical Director or designee will issue a final termination letter to the employee if he/she decides not to rebut the allegations in writing within the allotted time frame. ¶
Deleted: Should the employee decide to rebut the allegations in writing, the Chief Executive Officer, CHW Clinical Director, or designee will consider the appeal and make the final determination regarding the employment status of the employee. If the employee’s appeal is upheld, the Chief Executive Officer, CHW Clinical Director, or designee may impose an alternative type of corrective action (other than termination) such as a suspension without pay, demotion, transfer, etc. ¶
Serious problems of behavior that threaten or disrupt district operations or the work of other employees will result in immediate action to stop the behavior. This action may range from removal of the employee from the work site, suspension, or immediate dismissal.

Where an employee threatens or significantly disrupts operations or the work of other employees, the progressive corrective action plan need not be followed.

Violation of any of the following rules will be considered adequate justification for immediate dismissal:

- use, sale, possession, transfer, manufacture, distribution, dispensation, purchase or reporting to work under the influence or effects of alcohol, illegal narcotics, or any non-medically prescribed controlled drug or substance on company property;
- testing positive for any amount of illegal drugs, prescription drugs without a valid prescription, or alcohol;
- failure to complete an ordered drug and/or alcohol test;
- stealing or attempting to steal property from any individual on District premises, or stealing or attempting to steal property from the District;
- bodily assault upon any person, or fighting on District property;
- indecent conduct on District premises;
- Unlawful possession or reckless use of firearms or any dangerous weapons on District property;
- threatening, intimidating, coercing, or interfering with other employees;
- insubordination to supervisor, refusal to perform supervisor's assignments (unless assignment violates the law), or directing abusive or threatening language toward any District supervisor, employee, or representative;
- disclosing business information of a confidential nature to unauthorized persons, or any action by an employee that would create poor public relations;
- fraud committed by knowingly accepting pay for time not worked;
- acts of sabotage, or other interference with District projects;
- conviction of a felony that shows relationship between the position and reason for conviction;
- job abandonment (absence for three consecutive working days without notifying supervisor);
- unsafe operation of equipment in a negligent manner or destruction of District material or property or the property of fellow employees (the purpose of this provision is to impress upon each employee the need to observe responsible, intelligent, and safe working practices for his own and his co-workers' safety as well as the protection of valuable District property);
- abusive language directed toward employees, management, the District, customers, patients, or vendors;
- falsification of documents; or
- violation of rules of licensure or certification board.

Other inappropriate behavior may be determined to be of equal seriousness with those listed and an employee may be given corrective action/dismissal based on those additional types of behaviors.
Forms
- District Official Discipline Notice
- GCHD Investigation Form
Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

Policy
It is the District’s policy that each employee’s performance be evaluated at the conclusion of the initial six-month period of employment; six-months after the employee has been transferred, promoted, or demoted; with a significant change in job responsibilities; and at least annually.

Objective
The objective of the employee performance evaluation is to:

- Obtain an official, objective and comprehensive summary of an employee's performance for reference in employment matters;
- Assess job-related strengths and competencies;
- Encourage effective communication between the employee and the supervisor(s);
- Identify and document individual contributions to the District’s mission and Strategic Health Plan;
- Evaluate whether or not goals/expectations from the prior review period were accomplished and set new goals for the new review period;
- Allow supervisors to identify, recognize, and appreciate employee instances of exceptional performance as well as identify performance problems requiring an improvement plan or other future corrective measures.

General Objectives during Performance Evaluation Period:

- Review and update job descriptions to ensure they meet the mission and business needs of the District and reflect actual work performed;
- Review and summarize reports and performance measures that assess employee job performance over the entire review period;
- Ensure that each employee understands their supervisor's evaluation of their essential job expectations and has the opportunity to seek clarification and direction;
- Assure each employee is evaluated based on essential job functions and categories of expectations to include strategic requirements of the District as a whole, as well as that specific to their service area;
- Allow each employee a summary of their job-related strengths, weaknesses, trainings, and future expectations, and a plan for development/improvement, noting any corrective actions taken during the current review period;
- Obtain a review and assessment of every evaluation by the next level of management (if applicable) to assess the immediate supervisor’s performance in completing the evaluation, to identify performance concerns, and to make recommendation to improve supervisory and employee performance.

Approved
UBOH 08/28/19
Effective 07/30/04

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Violation
Corrective disciplinary action up to and including, suspension, or dismissal will be taken against any supervisor willfully violating this policy.

Exceptions Any deviations from the performance evaluation process or timeline must be reviewed and approved by the Chief Executive Officer or designee. If an employee is on Family and Medical Leave (FMLA) or another leave of absence at the normally scheduled time for a performance evaluation, the performance review may be deferred until the employee returns to work.

Forms

- Confidential Performance Evaluation
Separation of Employment Policy

**Audience**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees.

**Policy**
Employees wishing to resign are to submit a written notice of resignation prior to the effective date of resignation. The notice must be submitted to the employee’s supervisor(s) for forwarding to Human Resources.

In order to meet public service commitments, it is the District’s policy that employees who choose to resign their employment with the District will give at least two weeks notice prior to his/her last day of employment. Furthermore, District management and Coastal Health & Wellness medical and dental providers are expected to give four weeks advance notice due to business commitments and advanced patient appointment schedules. Requests for exceptions to advance notice requirements must be submitted, in writing, to the Chief Executive Officer or designee. Only legitimate, unavoidable circumstances will be considered.

Upon separation, employees are expected to comply with the requirements of the District’s employee retirement plan.

**Accrued Leave Payouts**
If an employee is involuntarily separated from employment due to a reduction in force, or as a result of corrective action, the employee will receive the full balance of accrued, unused vacation leave and compensatory time.

If an employee voluntarily resigns from employment with at least two weeks’ advance written notice (with the exception of District management and providers who must give four weeks’ advance written notice), the employee will receive the full balance of accrued, unused vacation leave and compensatory time.

Unless an exception is granted by the Chief Executive Office or designee, if an employee voluntarily resigns from employment with less than two weeks’ advance written notice (with the exception of District management and providers who must give four weeks’ advance written notice), the employee will not receive payment for accrued or unused vacation leave. (Reference: Employee Leave policy)
Sick leave and Wellness leave are not compensable upon separation of employment.

Checkout Interview
Human Resources shall meet with the exiting employee on or just prior to the employee’s last day of work to determine the final disposition of the following:
- verify the employee's forwarding address (for W-2 purposes);
- complete benefit paperwork;
- discuss insurance conversions;
- assure the employee returns all District property (keys, id badge, etc.);
- assure all travel advances and expense reports are balanced;
- determine method of delivery for final paycheck; and
- assess any other separation of employment matters.

Exit Survey
Human Resources shall provide the departing employee the GCHD Exit Survey one week prior to the employee’s last day of work if the employee voluntarily separates from the organization. The purpose of the survey is for the organization to obtain feedback from employees who decide to end their employment with GCHD. The feedback on both favorable and unfavorable employment matters will be combined with feedback received by others. The written results of the survey will be forwarded to the Human Resource Director, Chief Executive Officer and the employee’s respective manager and/or director.

Laws
It is the intent of this policy to be in compliance with the Fair Labor Standards Act and the Texas Payday Law.

Violation
Violation of this policy will be noted in the employee’s personnel file and may result in loss of accrued, unused vacation leave as outlined above.
**Sexual Harassment Policy**

**Audience**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “the District”) employees, volunteers, students, and contractors (business associates).

**Policy**
The District is committed to maintaining a workplace free of sexual harassment. Sexual harassment is a violation of Title VII of the Civil Rights Act of 1964 (as amended) and, as an employer, the District can be held responsible for sexual harassment committed by its employees and agents.

Sexual harassment is any unwelcome sexual advance, request for sexual favor and/or other verbal or physical conduct of a sexual nature when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of employment (quid pro quo);
- Submission to or rejection of such conduct by an individual is used as a basis for employment decisions affecting such individual; or
- Such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

Behaviors such as (but not limited to) verbal or physical advances, requests for sexual favors, making sexually explicit derogatory or suggestive remarks, making inappropriate statements or gestures based on gender, or displaying of sexually oriented books, magazines, photos, cartoons, or objects that are offensive or objectionable are common to claims of sexual harassment.

The legal definition of sexual harassment, as developed by the courts, includes different types of sexual conduct, such as:

- **Quid pro quo** - the Latin phrase meaning "something for something." This type of harassment occurs when, for example, a supervisor makes unwelcome sexual advances at a subordinate employee and submission to the advances is an expressed or implied condition of employment for receiving job benefits; or, refusal to submit to the demands results in a loss of a job benefit or in termination of employment.
- **Hostile environment** - relentless and continuing unwelcome sexual conduct that interferes with an employee's work performance or that creates an intimidating, hostile, abusive or offensive work environment.
- **Harassment by non-employees** - the agency may be liable for the sexual harassment of employees by customers, or other third parties, if the District was made aware of the improper behavior but failed to attempt to mitigate the issue.

Sexual harassment may occur in a variety of situations and circumstances. Although it is not possible to catalog every situation or conduct that constitutes sexual harassment, the following circumstances may all be applicable.

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*Approved 08/28/19*
*Effective 07/02/04*

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The victim, as well as the harasser, may be a male or female.

The victim does not have to be of the opposite gender.

The harasser can be the victim's supervisor, a supervisor from another area, a co-worker, customer, vendor, volunteer, or contractor.

The victim does not have to be the person who is harassed, but can be anyone adversely affected by the offensive conduct.

The harasser's conduct is unwelcome.

Employees who experience sexual harassment should make it known to the harasser that their actions are not welcomed. The employee should indicate that they do not want the behavior to continue and that their actions make them uncomfortable. Any employee who feels that he/she is a victim of sexual harassment must immediately report the matter to their supervisor, manager, director, Human Resources Director or the Chief Compliance Officer.

Confidentiality
Information related to the complaint and issues discussed with the Human Resources Director and/or Chief Compliance Officer will be treated as confidential. However, the ability to maintain such confidentiality may be limited by law or by the best interests of the District, the employee or other employees.

False Reporting
Any employee who makes an intentionally false accusation of sexual harassment is subject to corrective disciplinary action up to and including termination.

Investigation of Complaints
The Chief Compliance Officer and/or Human Resources Director will promptly initiate an investigation into any allegation of sexual harassment. The Chief Compliance Officer and/or Human Resources Director will make every reasonable effort to determine the facts pertinent to the complaint.

The investigation may include, but is not limited to, interviews with witnesses and discussions with involved parties. During the course of the investigation, the alleged harasser may be placed on paid administrative leave to allow for the investigator to work unimpeded. All investigations of sexual harassment complaints shall be conducted as discreetly as possible. Upon conclusion of the investigation, the Chief Compliance Officer, and the Human Resources Director will convene to discuss the investigation's results and the appropriate disciplinary action, if any, to be imposed.

If findings support the charge of sexual harassment against the accused employee, that employee shall be subject to disciplinary action, up to and including termination.

Accusation of Sexual Harassment
Retaliati against or disciplining any person for reporting an allegation of sexual harassment is strictly prohibited. Any employee who makes an intentionally false accusation of sexual harassment shall be subject to disciplinary action, which may include, but is not limited to, suspension, probation, or dismissal.
**Training**
All employees must receive training on the District’s policy and procedures related to sexual harassment. Training will be provided for new employees during orientation and for existing employees on an annual basis. Human Resources will ensure the District’s compliance with this requirement.

**Law**
It is the intent of this policy to be in compliance with Title VII of the Civil Rights Act of 1964 (as amended).
Vehicular Accidents/Incidents Policy

Audience
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, and Coastal Health & Wellness (collectively “the District”) employees who operate vehicles owned or leased by the District.

Policy
The District is committed to maintaining a safe and productive work environment for all employees and to ensuring that safe and efficient services are rendered to the citizens of Galveston County.

Post-Accident / Incident Drug and Alcohol Testing
Any employee involved in a vehicle accident or incident that results in damage to any vehicle, personal or private property, or injury to any person, regardless of fault, is required to immediately report the accident/incident to his/her supervisor. The supervisor is responsible for removing the employee who was operating the vehicle from active duty and coordinating a drug and alcohol test to be performed immediately on the employee.

If the accident/incident occurs during regular business hours, the supervisor is to contact Human Resources or the Risk and Safety Coordinator for guidance and drug testing locations. If the accident/incident occurs after regular business hours, the supervisor is responsible for contacting a drug testing company and requesting that a representative from the company arrive on location and perform a field drug and alcohol test on the employee. The supervisor is required to stay with the employee until the testing is complete and results have been provided.

The supervisor is responsible for contacting the department’s manager or director to discuss the circumstances of the accident or incident, and may recommend the employee be placed on paid administrative leave pending the outcome of the drug and alcohol test.

No later than the following business day after the event’s occurrence, the supervisor is responsible for notifying Human Resources of the event and for completing an Employee Incident or Injury Report form and submitting the report to the Risk and Safety Coordinator. Human Resources will consult with the supervisor and departmental director regarding next steps.

Failure of an employee to complete the ordered drug and alcohol test will result in immediate termination. Any employee who tests positive for any amount of illegal drugs or prescription drugs without a valid prescription and/or alcohol will be terminated (Reference: Drug-free Workplace policy).

Mandatory Defensive Driving
Any employee who has had an accident/incident in a District owned vehicle and/or receives a citation may be required to complete an approved defensive driving and/or emergency vehicle operation course. The course will be taken at the employee’s expense and completed on the employee’s own time, and a certificate of completion must be presented to the employee’s supervisor and to Human Resources within sixty (60) calendar days from the date on which the course was assigned. The employee is responsible for
submitting documentation to Human Resources within the designated timeframe. Failure to complete a mandated defensive driving and/or emergency vehicle operation course within the required time period may result in suspension or termination.

**Preventable Accidents/Incidents**

All vehicular accidents and incidents will be reviewed by the Risk and Safety Committee to determine the cause(s) of the accident or incident, to assess whether the accident or incident was preventable, and to discuss the implementation of policies or procedures to prevent similar recurrences.

If an employee was engaged in a preventable incident, it will be up to the employee’s supervisor to work with the Human Resources Director to determine the appropriate disciplinary action, if any.

**Violation**

Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension.

**Forms**

Employee Incident or Injury Report.
Volunteer Policy

Audience

This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority and Coastal Health & Wellness (collectively “District”) employees, volunteers, and contractors (business associates).

Policy

The Galveston County Health District is committed to providing the best programs and services to its clients and to the community. Volunteers help to improve community awareness of public health issues and services. Using volunteers helps educate and train potential future employees and is a cost-effective means of addressing workforce shortages.

Generally, volunteers 18 years of age and above are accepted at the Health District; however, with the approval of the Chief Executive Officer or designee, program-specific volunteer programs may be approved for an age exception as long as operational, legal, and risk reduction concerns are properly assessed.

Types of Volunteers

A volunteer is considered an individual who, beyond the confines of paid employment or contract responsibilities, contributes time and service to assist in the accomplishment of a mission. Volunteers include:

- General public
- Those associated with community-based organizations including faith-based institutions
- Health Professionals
- Students - supervised by a faculty
- Licensed Professionals
  - those that do not go through the Health District’s LIP credentialing process (RNs, LVNs, EMTs, Non-certified X-Ray Technicians, Registered Dental Assistants, Dental Hygienists, etc.)
  - those that go through the Health District’s LIP credentialing process (MDs, Mid Levels, Dentists, etc.)
- Those legally required to do community service
- Public Health Emergency Preparedness volunteers

In accordance with the Fair Labor Standards Act, employees of the Health District may not “volunteer” time to the District. All hours worked must be compensated according to the Hours Worked and Compensatory/Overtime policy.

Orientation / Training

Volunteers will be trained on appropriate and required topics related to their area(s) of service.
Human Resources will notify the volunteer of the specific date and time of the orientation and coordinate with a program area point of contact for assignment times and dates. Volunteers will be oriented / trained by the supervisor on matters specific to the area where they will work.

**Immunization Requirements**
Volunteers are required to receive the same vaccinations as employees and at their own expense. Exceptions will be made on a case by case basis by the Chief Nursing Officer depending on areas worked, type of vaccine/communicable disease, types of exposure risk(s), mode of transmission, period of volunteerism, types of volunteer duties, local epidemiological information, etc.

**Insurance**
All volunteers at the Health District are expected to stay within their discipline, scope of services and activities, approved privileges and established clinical practice guidelines. All students from professional schools are expected to have a memorandum of understanding in place prior to volunteering.

Volunteers are not covered under the Health District’s Workers’ Compensation insurance. Those Public Health Emergency Preparedness volunteers assisting in an emergency situation are protected under various state and federal laws.

Extenuating circumstances require volunteer activities and coverage to receive advanced review and approval from the Human Resources Director prior to volunteering.

*Students who provide healthcare services in the Coastal Health & Wellness Clinic or within the Immunization Services area will be assigned a preceptor or a faculty.*

- “preceptor” is the GCHD staff person assigned to supervise the volunteer
- “faculty” is the person associated with student’s teaching institution.

**Violation**
Any violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension, probation, or dismissal.

**Forms**
- Volunteer Registration
- Volunteer Timesheet
- Confidentiality Agreement
- Volunteer Program Orientation Acknowledgement
Employee and Pre-hire Immunizations and Screenings

**Audience**
This policy applies to all Galveston County Health District, Galveston Area Ambulance Authority, Coastal Health & Wellness (collectively “the District”) employees, pre-hires, volunteers, and students.

**Policy**
As a condition of employment, each pre-hire and current employee must provide proof of meeting the recommended minimal immunizations requirements listed below. Any vaccine that is given in a series, the pre-hire must show proof of getting the initial dosage prior to being employed but can get the final dosages provided by GCHD as an employee. Volunteers and students are required to receive the same vaccinations as employees and at their own expense. *(Reference: Volunteer policy)*

Employees who experience a job-related exposure are required to follow post-exposure recommendations (including follow-up blood tests) as instructed by the Chief Nursing Officer or designee. Failure to follow post-exposure recommendations may result in corrective disciplinary action up to and including dismissal.

**Required Immunizations**

<table>
<thead>
<tr>
<th>Category</th>
<th>Employee Group</th>
<th>Vaccine Requirements</th>
<th>Vaccine Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>All employees</td>
<td>MMR, Tdap, Varicella</td>
<td>Proof must be shown prior to hire date.</td>
</tr>
<tr>
<td>2</td>
<td>Health Care Employees performing tasks involving exposure to blood or blood-contaminated body fluids. For example, nurses, medical aids, providers, lab technicians, dentists, dental assistants, EMS employees and WIC staff.</td>
<td>All Category 1 requirements and Hepatitis B</td>
<td>Hepatitis B vaccine is required for state licensing. Pre-hire must show proof of beginning series, GCHD will provide remaining dosages after hire date.</td>
</tr>
<tr>
<td>3</td>
<td>Employees performing tasks involving exposure to animals that may have rabies.</td>
<td>All Category 1 requirements and Rabies</td>
<td>Pre-hires and Employees will be provided the vaccine by GCHD after hire date.</td>
</tr>
</tbody>
</table>

**Tuberculosis (TB) Screening**
All new employees will be required to begin TB two-step (TST) prior to their hire date. All employees will complete an annual TB screening questionnaire based upon the results of annual TB Risk Assessment.
All new employees will be required to provide a current (less than 12 months from date of hire) TST or IGRA prior to their start date. In the event a new hire employee is a prior positive reactor, a chest X-ray (less than 12 months from date of hire) will suffice for clearance. Any employee exposed to TB will undergo post-exposure repeat screening. Positive reactors will be evaluated by the TB Program Manager. Any employee found to have active pulmonary tuberculosis will be excluded from the workplace while contagious.

**Responsibilities**

Each employee is responsible for:
- providing the Immunization Program Manager a copy of their immunization record (if available) or proof of immunity, prior to their start date; and
- keeping immunizations up-to-date in accordance with this policy.

All supervisors are responsible for:
- working with the Immunization Program Manager to identify the category of immunization requirements for each position;
- ensuring employees follow this policy;
- reporting non-compliance to the Chief Nursing Officer or designee; and
- taking appropriate corrective action against any employee who fails to follow this policy.

The Human Resources Director, or designee, is responsible for:
- incorporating vaccine requirements into individual job descriptions, and
- notifying pre-hires of requirements based on national guidelines adopted by the Health District.

The Immunization Program Manager, or designee, is responsible for:
- working with the supervisor to identify the category of immunization requirements for each position;
- screening pre-hires for compliance with vaccine requirements;
- establishing a system for tracking employee immunization records and assuring ongoing compliance;
- notifying the employee and supervisor of requirements, need for vaccination, and follow-up dates; and
- following protocols established by the Local Health Authority.

TB Program Manager
- Evaluates all positive Reactions of Pre-hires and employees

**Violation**

Violation of this policy may result in appropriate corrective disciplinary action, up to and including suspension or dismissal.

**Forms**

*Employee Immunization Category*

Back to Agenda
United Board of Health
August 2019
Item #5
Consider for Approval City of Bayou Vista's Re Appointments to the Animal Services Advisory Committee
Consider for Approval City of Bayou Vista’s Re Appointments to the Animal Services Advisory Committee

*New term for member will be 10-01-19 to 9-30-2021*

CITY OF BAYOU VISTA

- **Daniel Konyha**
  - Phone: 504-202-7865
  - Fax: 409-935-1205
  - Email: mayor@bayouvista.us
  - Term Expires: 9-30-19

- **Alternate - James L Cook III**
  - Phone: 832-228-7063
  - Email: jlc3bv@gmail.com

Back to Agenda
United Board of Health
August 2019
Item #6
Informational Reports
a) CHW June 2019 Financial Report
b) Morbidity Report
c) Letter of Support for a 319 Grant for a Watershed Protection Plan for Clear Creek
COASTAL HEALTH & WELLNESS

Governing Board

FINANCIAL SUMMARY

For the Period Ending June 30, 2019

August 1, 2019

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591
CHW - BALANCE SHEET  

as of June 30, 2019

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>Current Month Jun-19</th>
<th>Prior Month May-19</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash &amp; Cash Equivalents</td>
<td>$5,312,119</td>
<td>$5,339,944</td>
<td>($27,826)</td>
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<tr>
<td>Accounts Receivable</td>
<td>$1,800,804</td>
<td>$1,860,771</td>
<td>($59,966)</td>
</tr>
<tr>
<td>Allowance For Bad Debt</td>
<td>$(1,208,772)</td>
<td>$(1,170,684)</td>
<td>$(38,087)</td>
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<tr>
<td>Pre-Paid Expenses</td>
<td>$168,123</td>
<td>$66,643</td>
<td>$101,480</td>
</tr>
<tr>
<td>Due To / From</td>
<td>$(25,174)</td>
<td>$(18,121)</td>
<td>$(7,053)</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$6,047,100</td>
<td>$6,078,553</td>
<td>($31,453)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES</th>
<th>Actual</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts Payable</td>
<td>$101,991</td>
<td>$(32,339)</td>
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<tr>
<td>Accrued Salaries</td>
<td>$348,397</td>
<td>$37,561</td>
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<tr>
<td>Deferred Revenues</td>
<td>$13,252</td>
<td>$(5,437)</td>
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<tr>
<td><strong>Total Liabilities</strong></td>
<td>$501,201</td>
<td>$(215)</td>
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</table>

<table>
<thead>
<tr>
<th>FUND BALANCE</th>
<th>Current Month Jun-19</th>
<th>Prior Month May-19</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fund Balance</td>
<td>$5,813,682</td>
<td>$5,813,682</td>
<td>$0</td>
</tr>
<tr>
<td>Current Change</td>
<td>$(267,783)</td>
<td>$(236,545)</td>
<td>$(31,239)</td>
</tr>
<tr>
<td><strong>Total Fund Balance</strong></td>
<td>$5,545,900</td>
<td>$5,577,137</td>
<td>($31,239)</td>
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</tbody>
</table>

Total Liabilities & Fund Balance: $6,047,100, decrease of ($31,453)

CHW - REVENUE & EXPENSES  

as of June 30, 2019

<table>
<thead>
<tr>
<th>REVENUE</th>
<th>Actual Jun-19</th>
<th>Budgeted Jun-19</th>
<th>PTD Budget Variance</th>
<th>YTD Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Revenue</td>
<td>$324,071</td>
<td>$324,070</td>
<td>$1</td>
<td>$2</td>
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<tr>
<td>DSRIP Revenue</td>
<td>0</td>
<td>79,167</td>
<td>$(79,167)</td>
<td>$(237,500)</td>
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<tr>
<td>HHS Grant Revenue</td>
<td>$207,197</td>
<td>$260,617</td>
<td>$(53,419)</td>
<td>48,912</td>
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<tr>
<td>Patient Revenue</td>
<td>$232,093</td>
<td>$751,002</td>
<td>$(518,909)</td>
<td>$(1,494,163)</td>
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<tr>
<td>Other Revenue</td>
<td>$11,865</td>
<td>$23,635</td>
<td>$(11,770)</td>
<td>$(33,960)</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$775,226</td>
<td>$1,438,490</td>
<td>$(663,264)</td>
<td>$(1,716,708)</td>
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</table>

<table>
<thead>
<tr>
<th>EXPENSES</th>
<th>Actual</th>
<th>Budgeted</th>
<th>PTD Budget Variance</th>
<th>YTD Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$549,963</td>
<td>$680,896</td>
<td>$130,933</td>
<td>$220,638</td>
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<tr>
<td>Contractual</td>
<td>52,727</td>
<td>85,808</td>
<td>$33,081</td>
<td>76,926</td>
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<tr>
<td>IGT Reimbursement</td>
<td>0</td>
<td>37,500</td>
<td>37,500</td>
<td>112,500</td>
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<tr>
<td>Supplies</td>
<td>$66,263</td>
<td>$121,986</td>
<td>$55,363</td>
<td>$(13,990)</td>
</tr>
<tr>
<td>Travel</td>
<td>3,709</td>
<td>2,519</td>
<td>$(1,191)</td>
<td>$(4,789)</td>
</tr>
<tr>
<td>Bad Debt Expense</td>
<td>$38,072</td>
<td>$417,493</td>
<td>$379,421</td>
<td>$1,131,723</td>
</tr>
<tr>
<td>Other</td>
<td>$95,370</td>
<td>$92,289</td>
<td>$(3,081)</td>
<td>$(141,087)</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$806,464</td>
<td>$1,438,490</td>
<td>$(632,026)</td>
<td>$(1,381,921)</td>
</tr>
</tbody>
</table>

CHW - BALANCE SHEET  

as of June 30, 2019

<table>
<thead>
<tr>
<th>CHANGE IN NET ASSETS</th>
<th>Actual</th>
<th>Budgeted</th>
<th>PTD Budget Variance</th>
<th>YTD Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>($31,239)</td>
<td>0</td>
<td>$(31,239)</td>
<td>$(334,787)</td>
<td></td>
</tr>
</tbody>
</table>

### HIGHLIGHTS
- MTD decrease in Fund Balance of ($31,239) and YTD decrease of ($267,783).
- MTD revenues were underbudget by $663,265 due to change in recording Self Pay Revenue, and lower revenues in Private Insurance, Medicare and Medicaid revenues as well as lower revenues for HHS expenses.
- MTD expenses were $632,026 underbudget due to change in reporting Self Pay Bad Debt expense. Supplies were underbudget $55,363, while Other expenses were overbudget by $(3,081). Other expenses included $9,250 from Fund Balance Reserve for final payment for XEC Medical Imaging. This was offset by savings in Personnel and Contractual expenses. Travel was overbudget by $(1,191) for travel expenses to SUD-MH conference, which will be reimbursed by SUD-MH Grant. Total YTD SUD-MH expenses total $8,439.18. These funds will be drawn after carry-over approval is received from HRSA.
- Total Fund balance is $5,545,900 as of 6/30/19.
Actual Revenue & Expenses in Comparison to Budget

Current Period Patient Revenue with Third Party Payor Contributions Identified

Actual Patient Revenue Rec’d vs Budget
## Coastal Health & Wellness

### Statement of Revenue and Expenses for the Period ending Jun 30, 2019

**Category**                  | Description                      | Period Ending 6/30/19 | MTD Budget | MTD Variance | YTD Budget | YTD Variance | Annual Budget | Annual Variance | Actual Budget | Actual Variance |
---                            |                                  |                      |            |              |            |              |               |                |              |                |
### Revenue

<table>
<thead>
<tr>
<th>Grouping</th>
<th></th>
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</tr>
</tbody>
</table>
### Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
<th>Period Ending 6/30/19</th>
<th>MTD Budget</th>
<th>MTD Variance</th>
<th>YTD Budget</th>
<th>YTD Variance</th>
<th>Annual Budget</th>
<th>Annual Variance</th>
<th>Actual Budget</th>
<th>Actual Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Total Revenue**: $784,476, $1,432,560 ($648,085) $2,691,779 $4,362,947 ($1,671,168) $17,261,885

**Total Expenses**: $5,404 $5,115 ($289) $137,911 $15,345 $365,700

**Net Income**: $2,205 $2,175 ($289) $1,393,825 $13,324 $13,904,174

---
### Coastal Health & Wellness

Statement of Revenue and Expenses for the Period ending Jun 30, 2019

<table>
<thead>
<tr>
<th>Description</th>
<th>Period Ending 6/30/19</th>
<th>MTD Budget</th>
<th>MTD Variance</th>
<th>YTD</th>
<th>YTD Budget</th>
<th>YTD Variance</th>
<th>Annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COMPUTER EQUIPMENT</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>OPERATING EQUIPMENT</td>
<td>$9,250</td>
<td>$0</td>
<td>($9,250)</td>
<td>$18,500</td>
<td>$0</td>
<td>($18,500)</td>
<td>$0</td>
</tr>
<tr>
<td>BUILDING IMPROVEMENTS</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>NEWSPAPER ADS</td>
<td>$894</td>
<td>$1,500</td>
<td>$606</td>
<td>$3,295</td>
<td>$4,500</td>
<td>$1,205</td>
<td>$18,000</td>
</tr>
<tr>
<td>SUBSCRIPTIONS, BOOKS, ETC</td>
<td>$0</td>
<td>$125</td>
<td>($125)</td>
<td>$150</td>
<td>$375</td>
<td>$225</td>
<td>$1,500</td>
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<tr>
<td>ASSOCIATION DUES</td>
<td>$6,000</td>
<td>$2,883</td>
<td>($3,117)</td>
<td>$8,000</td>
<td>$9,648</td>
<td>$648</td>
<td>$34,592</td>
</tr>
<tr>
<td>SOFTWARE, LICENSES, INTANGIBLES</td>
<td>$14,508</td>
<td>$18,355</td>
<td>$3,848</td>
<td>$91,761</td>
<td>$55,066</td>
<td>($36,695)</td>
<td>$220,265</td>
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<tr>
<td>PROF FEES/LICENSE/INSPECTIONS</td>
<td>$50</td>
<td>$203</td>
<td>$153</td>
<td>$75</td>
<td>$608</td>
<td>$533</td>
<td>$2,430</td>
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<td>PROFESSIONAL SERVICES</td>
<td>$329</td>
<td>$1,875</td>
<td>$1,546</td>
<td>$15,476</td>
<td>$5,625</td>
<td>($9,851)</td>
<td>$22,500</td>
</tr>
<tr>
<td>MED/HAZARD WASTE DISPOSAL</td>
<td>$454</td>
<td>$483</td>
<td>$29</td>
<td>$1,503</td>
<td>$1,450</td>
<td>($53)</td>
<td>$5,800</td>
</tr>
<tr>
<td>TRANSPORTATION CONTRACT</td>
<td>$405</td>
<td>$650</td>
<td>$245</td>
<td>$1,286</td>
<td>$1,950</td>
<td>$664</td>
<td>$7,800</td>
</tr>
<tr>
<td>BOARD MEETING OPERATIONS</td>
<td>$1</td>
<td>$29</td>
<td>$28</td>
<td>$45</td>
<td>$88</td>
<td>$42</td>
<td>$350</td>
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<tr>
<td>SERVICE CHG - CREDIT CARDS</td>
<td>$764</td>
<td>$685</td>
<td>($79)</td>
<td>$2,573</td>
<td>$2,055</td>
<td>($518)</td>
<td>$8,320</td>
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<td>CASHIER OVER / SHORT</td>
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<td>$0</td>
<td>($0)</td>
<td>$0</td>
<td>$0</td>
<td>($0)</td>
<td>$0</td>
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<tr>
<td>LATE CHARGES</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>BAD DEBT EXPENSE</td>
<td>$38,072</td>
<td>$417,493</td>
<td>$379,421</td>
<td>$120,757</td>
<td>$1,252,480</td>
<td>$1,131,723</td>
<td>$5,009,920</td>
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<tr>
<td>MISCELLANEOUS EXPENSE</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$858</td>
<td>$0</td>
<td>($858)</td>
<td>$0</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$806,464</strong></td>
<td><strong>$1,438,490</strong></td>
<td><strong>$632,026</strong></td>
<td><strong>$2,933,550</strong></td>
<td><strong>$4,315,471</strong></td>
<td><strong>$1,381,921</strong></td>
<td><strong>$17,261,885</strong></td>
</tr>
</tbody>
</table>

**Net Change in Fund Balance**

- ($21,989) Expenses Fund Bal. Reserve
- ($31,239)

**Net Change in Fund Balance**

- ($9,250) Expenses Fund Bal. Reserve
- ($334,787)

**Total Expenses**

- ($5,930)
- ($16,059)
- ($241,771)
- ($289,247)
- ($0)
### Medical Visits

<table>
<thead>
<tr>
<th>Month</th>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>2,696</td>
<td>2,363</td>
</tr>
<tr>
<td>Aug</td>
<td>2,267</td>
<td>2,413</td>
</tr>
<tr>
<td>Sept</td>
<td>2,720</td>
<td>2,115</td>
</tr>
<tr>
<td>Oct</td>
<td>2,974</td>
<td>2,725</td>
</tr>
<tr>
<td>Nov</td>
<td>2,857</td>
<td>2,351</td>
</tr>
<tr>
<td>Dec</td>
<td>2,542</td>
<td>2,175</td>
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<tr>
<td>Jan</td>
<td>2,939</td>
<td>2,714</td>
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<tr>
<td>Feb</td>
<td>2,798</td>
<td>2,534</td>
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<tr>
<td>Mar</td>
<td>2,946</td>
<td>2,484</td>
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<tr>
<td>Apr</td>
<td>2,334</td>
<td>2,119</td>
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<tr>
<td>May</td>
<td>2,177</td>
<td>2,171</td>
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<tr>
<td>June</td>
<td>2,205</td>
<td>1,797</td>
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<tr>
<td></td>
<td><strong>31,455</strong></td>
<td><strong>27,961</strong></td>
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### Dental Visits

<table>
<thead>
<tr>
<th>Month</th>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>899</td>
<td>427</td>
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<tr>
<td>Aug</td>
<td>820</td>
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<tr>
<td>Sept</td>
<td>903</td>
<td>426</td>
</tr>
<tr>
<td>Oct</td>
<td>838</td>
<td>531</td>
</tr>
<tr>
<td>Nov</td>
<td>749</td>
<td>447</td>
</tr>
<tr>
<td>Dec</td>
<td>772</td>
<td>530</td>
</tr>
<tr>
<td>Jan</td>
<td>597</td>
<td>656</td>
</tr>
<tr>
<td>Feb</td>
<td>354</td>
<td>699</td>
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<tr>
<td>Mar</td>
<td>0</td>
<td>763</td>
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<tr>
<td>Apr</td>
<td>167</td>
<td>728</td>
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<tr>
<td>May</td>
<td>362</td>
<td>783</td>
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<tr>
<td>June</td>
<td>446</td>
<td>731</td>
</tr>
<tr>
<td></td>
<td><strong>6,907</strong></td>
<td><strong>7,244</strong></td>
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</table>

### Counseling Visits

<table>
<thead>
<tr>
<th>Month</th>
<th>Prior Period</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>45</td>
<td>67</td>
</tr>
<tr>
<td>Aug</td>
<td>38</td>
<td>66</td>
</tr>
<tr>
<td>Sept</td>
<td>32</td>
<td>64</td>
</tr>
<tr>
<td>Oct</td>
<td>48</td>
<td>79</td>
</tr>
<tr>
<td>Nov</td>
<td>52</td>
<td>69</td>
</tr>
<tr>
<td>Dec</td>
<td>60</td>
<td>59</td>
</tr>
<tr>
<td>Jan</td>
<td>62</td>
<td>64</td>
</tr>
<tr>
<td>Feb</td>
<td>66</td>
<td>63</td>
</tr>
<tr>
<td>Mar</td>
<td>83</td>
<td>86</td>
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<tr>
<td>Apr</td>
<td>54</td>
<td>104</td>
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<td>May</td>
<td>53</td>
<td>100</td>
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<td>June</td>
<td>54</td>
<td>95</td>
</tr>
<tr>
<td></td>
<td><strong>647</strong></td>
<td><strong>916</strong></td>
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</tbody>
</table>
### Vists by Financial Class - Actual vs. Budget

As of June 30, 2019 (Grant Year 4/1/19-3/31/20)

<table>
<thead>
<tr>
<th>Financial Class</th>
<th>MTD Actual</th>
<th>MTD Budget</th>
<th>Over/(Under)</th>
<th>YTD Actual</th>
<th>YTD Budget</th>
<th>Over/(Under)</th>
<th>% Over/(Under)</th>
</tr>
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<tbody>
<tr>
<td>Medicaid</td>
<td>5,442</td>
<td>454</td>
<td>(267)</td>
<td>617</td>
<td>1,361</td>
<td>(744)</td>
<td>-55%</td>
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<tr>
<td>Medicare</td>
<td>3,640</td>
<td>303</td>
<td>(108)</td>
<td>718</td>
<td>910</td>
<td>(192)</td>
<td>-21%</td>
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<tr>
<td>Other Public (Title V, Contract)</td>
<td>1,728</td>
<td>144</td>
<td>9</td>
<td>546</td>
<td>432</td>
<td>114</td>
<td>26%</td>
</tr>
<tr>
<td>Private Insurance</td>
<td>4,718</td>
<td>393</td>
<td>(251)</td>
<td>494</td>
<td>1,180</td>
<td>(686)</td>
<td>-58%</td>
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<tr>
<td>Self Pay</td>
<td>31,361</td>
<td>2,613</td>
<td>(667)</td>
<td>7,840</td>
<td>(1,587)</td>
<td>-20%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>46,889</strong></td>
<td><strong>3,907</strong></td>
<td><strong>(1,284)</strong></td>
<td><strong>8,628</strong></td>
<td><strong>11,722</strong></td>
<td><strong>(3,094)</strong></td>
<td><strong>-26%</strong></td>
</tr>
</tbody>
</table>

### Unduplicated Patients - Current vs. Prior Year

**UDS Data Calendar Year**

January through December

<table>
<thead>
<tr>
<th></th>
<th>Current Year 2018 Actual</th>
<th>Jan-June 2018</th>
<th>Jan-June 2019 Actual</th>
<th>(% Decrease) Prior Year</th>
<th>% of Annual Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unduplicated Patients</td>
<td>16,345</td>
<td>8,698</td>
<td>8,676</td>
<td>(22)</td>
<td>53%</td>
</tr>
</tbody>
</table>

### Unduplicated Patients - Current vs. Prior Year

**HRSA Grant Year**

April through March

<table>
<thead>
<tr>
<th></th>
<th>Apr 2018 - June 2018</th>
<th>Apr 2019 - June 2019</th>
<th>Increase/Decrease Prior Year</th>
<th>% of Annual Target</th>
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</thead>
<tbody>
<tr>
<td>Unduplicated Patients</td>
<td>16,345</td>
<td>4,901</td>
<td>5,484</td>
<td>583</td>
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<tr>
<td>--------------------------------</td>
<td>------</td>
<td>------</td>
<td>------</td>
<td>------</td>
</tr>
<tr>
<td>Amebiasis</td>
<td>1</td>
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<tr>
<td>AIDS*</td>
<td>9</td>
<td>10</td>
<td>10</td>
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<td>Botulism</td>
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<tr>
<td>Campylobacteriosis</td>
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<td>45</td>
<td>41</td>
<td>48</td>
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<tr>
<td>Chlamydia trachomatis</td>
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<td>1579</td>
<td>1648</td>
<td>1584</td>
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<tr>
<td>Chikungunya</td>
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<tr>
<td>Creutzfeld-Jakob Disease</td>
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<td>0</td>
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<tr>
<td>Cryptosporidiosis</td>
<td>2</td>
<td>8</td>
<td>2</td>
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<tr>
<td>Cyclosporiasis</td>
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<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Dengue</td>
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<td>1</td>
<td>1</td>
<td>0</td>
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<tr>
<td>Elevated Blood Lead</td>
<td>33</td>
<td>25</td>
<td>32</td>
<td>19</td>
</tr>
<tr>
<td>E.coli, enterohemorrhagic</td>
<td>7</td>
<td>13</td>
<td>12</td>
<td>13</td>
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<tr>
<td>Gonorrhea</td>
<td>332</td>
<td>419</td>
<td>448</td>
<td>509</td>
</tr>
<tr>
<td>Haemophilus Influenza</td>
<td>5</td>
<td>7</td>
<td>5</td>
<td>8</td>
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<tr>
<td>Hepatitis, type A</td>
<td>5</td>
<td>5</td>
<td>3</td>
<td>1</td>
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<tr>
<td>Hepatitis, type B (acute)</td>
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<td>4</td>
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<tr>
<td>Hepatitis, type C (acute)</td>
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<td>Hepatitis, type E (acute)</td>
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<td>HIV infection*</td>
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<td>37</td>
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<td>*28</td>
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<td>Influenza associated Pedi death</td>
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<td>0</td>
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<td>Leishmaniais</td>
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<td>1</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Listeriosis</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<tr>
<td>Lyme Disease</td>
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<td>3</td>
<td>0</td>
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<td>Malaria</td>
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<td>Measles</td>
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<td>0</td>
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<tr>
<td>Meningococcal infection</td>
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<td>2</td>
<td>0</td>
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<tr>
<td>Multi-Drug Resistance Organism</td>
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<td>61</td>
<td>67</td>
<td>61</td>
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<tr>
<td>Mumps</td>
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<td>0</td>
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<tr>
<td>Opioid associated death*</td>
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<td>9</td>
<td>5</td>
<td>15</td>
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<tr>
<td>Pertussis</td>
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<tr>
<td>Salmonellosis</td>
<td>90</td>
<td>125</td>
<td>56</td>
<td>57</td>
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<tr>
<td>Shigellosis</td>
<td>139</td>
<td>224</td>
<td>10</td>
<td>25</td>
</tr>
<tr>
<td>Spotted Fever Rickettsiose</td>
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<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Strep. Infection, invasive group A</td>
<td>35</td>
<td>34</td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>Strep. Infection, invasive group B</td>
<td>20</td>
<td>30</td>
<td>36</td>
<td>34</td>
</tr>
<tr>
<td>Strep. Infection, invasive pneumo.</td>
<td>23</td>
<td>28</td>
<td>16</td>
<td>31</td>
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<tr>
<td>Syphilis</td>
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<td>37</td>
<td>45</td>
<td>61</td>
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<td>0</td>
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<tr>
<td>Typhus Fever</td>
<td>8</td>
<td>2</td>
<td>17</td>
<td>40</td>
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<td>Varicella (Chickenpox)</td>
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<td>22</td>
<td>18</td>
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<tr>
<td>Vibrio infection</td>
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<td>5</td>
<td>6</td>
<td>4</td>
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<tr>
<td>West Nile Virus Infection</td>
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<td>6</td>
<td>0</td>
<td>1</td>
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<tr>
<td>Yersinosis</td>
<td>1</td>
<td>4</td>
<td>1</td>
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<tr>
<td>Zika</td>
<td>9</td>
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<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Foodborne illness complaints</td>
<td>51</td>
<td>71</td>
<td>49</td>
<td>57</td>
</tr>
<tr>
<td>Rabies in animals</td>
<td>7</td>
<td>3</td>
<td>5</td>
<td>1</td>
</tr>
</tbody>
</table>

*Please note: Numbers are preliminary reports; therefore, these numbers are subject to change.
August 26, 2019

Mr. Todd Running, Manager
Community and Environmental Planning
Houston-Galveston Area Council
PO Box 22777
Houston, Texas 77227-2777

Re: TCEQ 319(h) grant proposal – Developing a Watershed Protection Plan for Clear Creek

Dear Mr. Running,

I am pleased to offer this letter in support for the Houston-Galveston Area Council’s (H-GAC) proposal for grant funding to develop a watershed protection plan for Clear Creek.

Developing locally supported, voluntary strategies to reduce sources of pollution within the Clear Creek watershed will help maintain the quality of life enjoyed by residents served by the Galveston County Health District. I believe that this watershed protection plan will supplement the existing water quality initiatives of Galveston County Health District and help us more effectively coordinate them with other agencies, local jurisdictions, and non-profit organizations.

We look forward to participating with you throughout the planning process. Please let me know if my office can be of any further assistance.

Sincerely,

Kathy Barroso, CPA
Chief Executive Officer
Galveston County Health District
United Board of Health
August 2019
Item #7
Executive Report
Serious health risks tied to childhood obesity

About one in five children in the United States is considered obese. While there is no simple solution to this public health problem, there are ways to support children on their journey to good health.

September marks National Childhood Obesity Awareness Month and provides a chance to learn more about this serious health condition. Children who are obese are at a higher risk for having other chronic health conditions and diseases, according to the Centers for Disease Control and Prevention (CDC). Those include asthma, sleep apnea, bone and joint problems and type 2 diabetes. They also have more risk factors for heart disease like high blood pressure and high cholesterol than their normal weight peers.

Children who are overweight or obese as preschoolers are five times as likely as normal-weight children to be overweight or obese as adults.

“Obesity in the United States is a problem. Specifically, the rate of obesity in children is alarming, and it’s growing,” said Eileen Dawley, RN, chief nursing officer. “Adults who are obese have a higher risk for diseases like type 2 diabetes, heart disease and many types of cancer.”

There are several factors that may lead to childhood obesity: too much time spent being inactive; lack of sleep; lack of places to go to get physical activity; easy access to inexpensive, high calorie foods and sugary beverages; and lack of access to affordable, healthier foods.

“Parents can help and set an example for their children. Choose nutritious meals with fruits and veggies and encourage your children to drink more water as a no-calorie alternative,” Dawley said.
OBESITY
Did you know nearly 40% of Americans are considered obese?

IN GALVESTON COUNTY
32% of adults are obese
only 24% are physically active

OBESITY CAN LEAD TO
Heart Disease  Type 2 Diabetes  Stroke  Cancer or Death

And, this isn’t just an issue in America. Worldwide, there are currently more than 41 million infants and children who are overweight. At this rate, the number will reach 70 million by 2025.

Those who are obese pay $1,429 more in medical costs each year than those who are not obese.

2.8 million people die each year from being overweight or obese. But, the good news is we can change all that!
Obesity and obesity-related illnesses can be prevented. How much does your health mean to you?

www.gchd.org  Facebook.com/GCHDinfo  Twitter.com/GCHDinfo
Employee spotlight features new immunizations manager

This month’s Employee Spotlight features Debbie Marshall, immunizations program manager at the Galveston County Health District (GCHD).

Marshall is a retired nurse from UTMB. She came to the immunizations clinic for services, inquired about possibly working in the program, and the rest is history.

In her spare time, Marshall enjoys traveling, taking cruises, reading and spending time with her grandchildren.

Employee Spotlight is a monthly video series highlighting the employees of GCHD, Galveston Area Ambulance Authority, Galveston County Animal Resource Center and Coastal Health & Wellness.

This series introduces co-workers and the community to the wonderful employees protecting and promoting the optimal health and well-being of Galveston County.

This month’s video is available on GCHD social media and the GCHD’s YouTube channel, where past Employee Spotlight videos may also be found.

ARC to host low-cost pet vaccine clinics Sept. 13, 14

The Galveston County Animal Resource Center (ARC) is happy to host two low-cost pet vaccination clinics on Friday, Sept. 13 and Saturday, Sept. 14. Both clinics are open to residents of any city and will include pet microchipping and county registration.

Low-cost vaccinations, flea control and heartworm testing and treatment services through ARC range from $15 for a rabies vaccine for both dogs and cats to $60 for the dog package and $45 for the cat package. Specific pricing is online at www.gchd.org/arc.

Microchips are available for all cats and dogs, regardless of jurisdiction, for just $20 each.

County regulation requires pet owners who live in the municipalities served by the ARC (Bayou Vista, Hitchcock, Kemah, La Marque, Texas City, Tiki Island and unincorporated Galveston County) to register their pets. There is no registration fee for pets that are already microchipped. Registration for pets that are not microchipped is $20 and includes a microchip. The fee is $15 for pet owners age 65 and older.

Both clinics will take place at ARC, located at 3412 25th Avenue North (Loop 197 North) in Texas City from noon-2 p.m. Sept. 13 and noon-3 p.m. Sept. 14. Appointments are not needed. Cash, check and major credit cards are accepted. For more information call 409-948-2485.
Each year, an estimated one in six Americans – that's 48 million people – get sick from food poisoning.

Anyone can get sick from food poisoning. The good news is there are ways to protect yourself and your family from falling ill.

As you prepare and handle food, the Centers for Disease Control and Prevention (CDC) suggests you follow these four tips: wash your hands, utensils and surfaces often when cooking; separate cooked food from raw meat, poultry, seafood and eggs, which can spread germs; use a food thermometer to make sure foods are cooked to an internal temperature that kills germs; and refrigerate perishable foods and leftovers within two hours and chill within one hour if it's above 90°F.

September marks National Food Safety Education Month. Below are some areas to pay attention to when dining out.

Look for a valid permit
All properly permitted and inspected food service establishments are required to display their food service permit where customers can see it. The permit is bright yellow and contains the GCHD logo at the top and a seal at the bottom. Locate the permit and verify it’s not expired.

“A permit confirms the establishment you’re visiting is in our system to be routinely inspected and that it has met proper safety requirements to prepare and serve food,” said Martin Entringer, GCHD consumer health services manager.

Check inspection scores
Most food service establishments are inspected at least twice annually based on criteria established in the Texas Food Establishment Rules. Low-risk facilities require one inspection per year. Inspections may occur more frequently based on an establishment’s risk level, violations and complaints.

GCHD performs approximately 5,500 food service inspections annually. Inspection results, scored as demerits, are posted online at www.gchd.org/restaurantscores.

“Demerit scores reflect conditions at the time of the inspection. They may not indicate current conditions,” Entringer added. “We suggest reviewing demerit scores over a period of time for the best representation of an establishment’s overall conditions.”

Check for cleanliness
The first indication of a restaurant’s overall cleanliness is the exterior. Look around to see if the building and grounds are well maintained. Once inside, make sure the tables, silverware and dishware are clean. Servers should be well-groomed and wearing clean uniforms. Restroom cleanliness also offers insight into a restaurant’s overall sanitation.

Be cautious with raw or undercooked food
Raw meat, poultry, eggs and seafood may carry bacteria that can cause illness, especially with those who have medical conditions. Proper thorough cooking kills potentially harmful bacteria.

Be careful with leftovers
Taking food to go is perfectly safe. Remember to refrigerate within two hours or one hour if the weather is over 90°F.
TERIYAKI PORK CHOPS WITH BLUEBERRY-GINGER RELISH

Ingredients

4 bone-in center cut pork chops (about 1 3/4 pounds), trimmed of fat

Marinade

12 oz. Lawry’s teriyaki with pineapple juice marinade
3 Tbsp. reduced-sodium soy sauce
2 Tbsp. dry sherry
2 cloves garlic, crushed
1 tsp. brown sugar
1/4 tsp. crushed red pepper

Blueberry-Ginger Relish

1 cup fresh blueberries, coarsely chopped
1 shallot, chopped
1 serrano chile, seeded and minced
1 Tbsp. chopped fresh cilantro
1 Tbsp. lime juice
1 tsp. minced fresh ginger
1/4 tsp. salt

Directions

To marinate, place pork chops in a large sealable plastic bag. Whisk soy sauce, sherry, brown sugar and crushed red pepper in a small bowl. Add the marinade to the bag, seal and turn to coat. Marinate in the refrigerator for at least two hours or overnight.

To prepare relish, about 20 minutes before grilling the pork, combine blueberries, shallot, chile, cilantro, lime juice, ginger and salt in a small bowl. Preheat the grill to high. Remove the pork chops for the marinade (discard marinade). Grill the chops 3-5 minutes per side. Let them rest for 5 minutes before serving with the relish. To make ahead, marinate the pork for up to one day.
Galveston County is no stranger to disasters. While the type may range from hurricane to tropical storm, floods or fires, one thing remains the same. When faced with a disaster, preparing ahead of time is vital to protect your family and property.

September marks National Preparedness Month and the Galveston County Health District (GCHD) encourages you to take time now to prepare for the wide variety of disasters you may face.

This year’s theme is “Prepared, Not Scared. Be Ready for Disasters.” Being prepared can be the difference between life and death.

Most homeowner and renter insurance policies do not cover flood damage. If you add flood insurance, keep in mind most policies take 30 days to go into effect, so don’t wait until it’s too late.

Take photos of important documents and personal belongings. Include birth and marriage certificates, immunization records for children and adults, driver license and other photo IDs and Social Security Cards. You also want photo documentation of valuables. It will help you quickly file an insurance claim after a flood, if necessary.

Disasters can be costly. Start now and set aside a small amount of each paycheck to go into a savings account. Also, keep cash on hand since ATMs and credit card readers may not be avail-

Classes are 5:30-6:30 p.m.

Dickinson: second and fourth Wednesday

Galveston: second and fourth Tuesday

Texas City: first and third Tuesday

GROW WITH US.

(409) 949-3471
gchod.org/wic
Galveston Area Ambulance Authority (GAAA) was thrilled to join the City of Galveston in celebrating the grand opening of Fire Station No. 1 in Galveston on Aug. 21. GAAA Medic 1, 2 and 10, along with supervisors, will also operate out of the new station. GAAA Director of EMS Amy Weber, GAAA EMS Operations Manager Tommy Leight and Galveston County Health District CEO Kathy Barroso, along with other GAAA staff, attended the grand opening.
Women, Infants and Children (WIC) staff celebrated World Breastfeeding Week with a Super Breastfeeding Extravaganza for WIC clients and the community on Aug. 7 with games, prizes, face painting, balloons, snacks and more. World Breastfeeding Week is a chance for WIC to highlight many of the resources available to expecting and breastfeeding mothers.

Public health nurses shared information about Healthy Eating, Active Living (HEAL) at Coastal Health & Wellness’ Community Resource Fair on Aug. 9. Visitors, at left, learned more about leading a healthier life, how much sugar is in different products and more.

Galveston County Health District (GCHD) outreach staff, above and at left, attended Movie on the Dike in Texas City Aug. 17.

Public Health Nurse Ashley Scibba, RN, at right, attended several outreach events in August, offering blood pressure and blood sugar screenings to the public.
The Animal Resource Center (ARC) participated in the nationwide pet adoption event Clear the Shelters on Aug. 17 and had 89 adoptions, an all-time high adoption rate for the ARC. Below are a few photos of families who welcomed new four-legged friends to their crew.
Diabetes 101
The Galveston County Health District (GCHD) Diabetes 101 class meets each Wednesday, 3-4 p.m. and is a support group for those living with diabetes. Topics include monitoring blood glucose, healthy eating, meal planning, understanding food labels, counting carbs and managing stress through increased activity. Classes take place in the GCHD Texas City WIC classroom, 9850-B Emmett F. Lowry Expressway, Suite B-101.02. Registration for the group is required by calling 409-938-2293 or emailing chs@gchd.org.

Mother’s Milk Club – Texas City
The Galveston County Health District’s Mother’s Milk Club meets 5:30-6:30 p.m. on the first and third Tuesday of each month at the Texas City WIC Clinic, 9850 Emmett F. Lowry Expressway, Suite B-101. For information, call 409-949-3471.

Mother’s Milk Club - Dickinson
The Galveston County Health District’s Mother’s Milk Club meets 5:30-6:30 p.m. on the second and fourth Wednesday of each month at the Dickinson WIC Clinic, 2401 Termini St., Dickinson. For information, call 409-337-7606.

Mother’s Milk Club - Galveston
The Galveston County Health District’s Mother’s Milk Club meets 5:30-6:30 p.m. on the second and fourth Tuesday of each month at the Galveston WIC Clinic, 4700 Broadway, Suite F102, Galveston. For information, call 409-763-7207.

Free WIC cooking class
Learn how to cook with Galveston County Health District’s Women, Infant and Children (WIC) services and Galveston’s Own Farmers Market to create low-cost, delicious and healthy recipes. For more information, call 409-949-3471. All ingredients are provided and you get to eat the food you create! This is a FREE class open to WIC clients.

Healthy Concepts Clinic
Healthy Concepts Clinic (HCC) is a public health clinic that offers STD, HIV, Syphilis, Hepatitis C, Chlamydia and Gonorrhea testing as well as Tuberculosis case management and treatment. The Texas City clinic, located at 9850-B Emmett F. Lowry Expressway, Suite B103, is open Wednesdays 1-5 p.m. The Galveston clinic, located at Island Community center, 4700 Broadway, Suite F101, is open Mondays 9 a.m.-1 p.m.
Leftovers should be eaten within three to four days.

Some groups of people are more likely to get sick and have a more serious illness including children younger than 5, adults aged 65 and older, people with health problems or who take medications that lower the body’s ability to fight germs and sickness and pregnant women.

According to the CDC, those who are more likely to get food poisoning should not eat: undercooked or raw animal products including meat, poultry, eggs or seafood; raw or slightly cooked sprouts; unpasteurized (raw) milk and juices; and soft cheese unless it is labeled as made with pasteurized milk.

Food poisoning signs include high fever higher than 102°F, bloody diarrhea, frequent vomiting, diarrhea for more than three days and dehydration.

GCHD sanitarians routinely inspect more than 1,800 food service establishments for compliance with state regulations designed to protect the health and well-being of customers. GCHD investigates sanitation complaints related to food service establishments. Complaints may be filed by filling out the form at www.gchd.org/complaints or by calling 409-938-2241. Please provide contact information to allow GCHD to follow-up. Pictures may be submitted with complaints.

Food poisoning is a common, yet preventable public health problem. If someone believes they became ill from eating at a restaurant in Galveston County, it’s important to quickly report it to GCHD. Prompt reporting gives GCHD epidemiologists the best chance at determining the source.

Callers should be prepared to offer information about symptoms, what and where they recently ate and if they’ve seen a doctor.

Suspected food poisoning may be reported to 409-938-2208 or 409-938-2215 during business hours or 1-888-241-0442 after hours.

Preparedness

Food Safety

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Childhood Obesity

Provide vegetables, fruits and whole-grain products and choose lean meats like poultry, fish, lentils and beans for protein. And, remember portion size.

Make sure drinking water is always available as a no-calorie alternative to sugary beverages and limit juice intake. The idea is to balance calories from foods and beverages with the calories children use through physical activity and growth.

“Get active with your children. Find activities you enjoy as a family,” Dawley said. “It’s important that children get the recommended amount of physical activity every day.”

Children age 2 and older should get at least 60 minutes of enjoyable, varied, moderate-intensity physical activity every day.

Being active helps you prevent chronic diseases, improve heart and lung health, build strong bones and muscles, reduce fat, improve sleep, decrease stress, fight depression and increase your confidence and self-esteem.

“Small changes can make a difference. Together, we can all do our part to prevent childhood obesity,” Dawley said.
PUBLIC HEALTH PROGRAMS

ANIMAL SERVICES
Aug. 1-28, 2019
- There have been no reported cases of rabies.

COMMUNITY HEALTH SERVICES
July 24-Aug. 20, 2019
Breast Cancer Screenings
- A total of 39 screening mammograms were provided to women of Galveston County who met requirements of both BCCS and D’Feet programs. Staff processed 12 referrals from providers to have patients undergo diagnostic workups for breast cancer evaluation. This year, two women have been diagnosed with breast cancer. One was eligible for Medicaid and was referred to MD Anderson for treatment while the other was enrolled in the Medicaid for Breast Cervical Cancer (MBCC) program.

Immunization Program
- Immunization staff administered 1,711 shots (to 783 patients) during this time period, compared to 1,256 (to 592 patients) during the same time period last year, a 36 percent increase in the number of shots administered from the prior year.
- Immunization staff gave away free school supplies to school children receiving vaccines until supplies ran out.
- Ten cases of Perinatal Hepatitis B continue to be case managed by immunization staff.

HIV/STD Services
- The HIV/ STD control program conducted 79 HIV, Syphilis and Hepatitis C tests July 24-Aug. 21. Within the testing effort, the HIV/STD prevention team tested individuals at the Galveston County Jail and other community events.

Tuberculosis (TB) Control Services
- The TB program has nine TB cases to date this year. Currently, the TB program is treating eight confirmed TB cases. A total of 262 doses of Directly Observed Therapy (DOT) and Directly Observed Preventive Therapy (DOPT) were delivered to clients.
- A total of 33 clients were seen in chest clinic and five field visits were conducted during this time period.
- The TB manager will participate in a pilot training for treatment of Multi-Drug Resistant Tuberculosis (MDR-TB) patients at the Texas Center for Infectious Disease (TCID) in San Antonio in September.

Healthy Concepts Clinic
- Healthy Concepts Clinic saw 40 patients in Texas City and 16 in Galveston for this reporting period.
- A total of 14 patients have been treated for Chlamydia, 15 for Gonorrhea and seven for Syphilis.
Public Health Nursing
- Public health nurses made three Elevated Blood Lead Level (EBLL) home visits in Galveston.
- The Diabetes 101 class resumed in early August. Classes are being held in the WIC classroom weekly.
- Public health nurses participated in eight health fairs/ outreach events, providing information on health district services and a variety of health information to 281 participants. Blood pressure screenings were done for 76 participants with a total of 14 people having elevated blood pressures, nine of whom were referred for further care. Blood glucose screenings were done on 58 participants, with a total of five people having elevated blood glucose readings, one of whom was referred for further care. These individuals were provided with educational information and referrals to their own medical provider, the emergency room or the Coastal Health & Wellness (CHW) clinic, depending on the individual circumstances.

Women, Infants and Children (WIC)
- WIC’s Incredible Years parenting class concluded its summer session and new programs are being planned for the fall.
- WIC celebrated World Breastfeeding Week with a Super Breastfeeding Extravaganza for WIC clients and the community on Aug. 7 with games, prizes, face painting, balloons, snacks and more. Mothers who are currently breastfeeding, have breastfed in the past and expecting mothers were all welcomed, as were their support systems. World Breastfeeding Week is a chance for WIC to highlight many of the resources available to expecting and breastfeeding mothers.
- WIC served an estimated 3,923 clients in July, down 310 from July 2018.

Healthy Eating, Active Living (HEAL)
- HEAL promotional information was given at three community outreach events.
- A video on Diabetes 101 was filmed and will be added to the HEAL website and on social media.
- A survey was sent to health district employees seeking input on areas of interest to include on the HEAL website.
- A collaboration is in the works between the IT’S TIME TEXAS organization and the health district. This collaboration will allow for an abundance of resources for healthy living to be available to county residents.

ENVIRONMENTAL and CONSUMER HEALTH SERVICES
- Jennifer Peebler, registered sanitarian and a designated representative for the health district’s septic system program, has encountered many hazards in the field as she inspects the construction of septic systems. Recently, she was faced with a new hazard. An adult alligator was visiting the construction site the day of her inspection. Eventually, the alligator left, and she was allowed to complete her inspection.
- The Texas Commission on Environmental Quality (TEQ) conducted an on-site review of air compliance files on Aug. 9 and no issues were noted. Also, as part of the health district’s contract with TCEQ, TCEQ conducted an oversight audit of a major air investigation on Aug. 19. The TCEQ auditor noted the investigation was very thorough and that Air Investigator Tyler Brent was well prepared.
- In the continuation of the Pelican Island Storage Terminal (PIST) investigation and enforcement case, PIST has proposed to TCEQ that the administrative penalty being proposed within the
agreed order be deferred pending completion of a $2 million project to install vapor recovery systems on tanks located at the site. Air Services Program Manager Jenn Thickitt is currently working with the TCEQ Enforcement Division relative to the health district’s involvement in the case.

- On Aug. 8 Water Pollution Services Manager Katherine Wilson attended the Highland Bayou Watershed committee meeting. The committee received an update from Richard Matthews with Galveston County Municipal Utility District 12 (Bayou Vista) regarding a drainage project that will directly affect water quality in Highland Bayou. He is seeking assistance to get this project approved, funded and implemented. The committee also worked on the prioritization of action items for Moses Bayou and the Diversionary Canal to ensure the current Watershed Protection Plan is tackling the top pollutants and issues for these waterways.

**EPIDEMIOLOGY/ PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP)**

- On Aug. 2, epidemiology staff attended a back-to-school fair at Ball High School in Galveston and spoke to the community about disease prevention, Zika, Healthy Concepts Clinic and other services provided by the health district.
- On Aug. 7 and 13, epidemiology staff hosted a public health orientation for private and public school nurses and public information officers. A total of 78 private and public school officials attended. The orientation included information on the importance of reporting diseases as well as highlighting services provided by immunizations, public health nurses, TB, CHW, preparedness, STD/ HIV and public information.
- To date, a total of six Legionella cases have been reported to the epidemiology department this year. The first Legionella case was reported in April, four in July and one in August. Legionella is a pneumonia-like illness caused by a waterborne bacterium inhaled from vapor. Symptoms often start two-10 days after exposure and include diarrhea, nausea, vomiting, aching muscles, fever and chills. The disease can be deadly but is not spread from person-to-person.
- The epidemiology department has received five confirmed reports of Cyclospora in the county. One case was reported in July and four in August. Last year, there were three reports. There are currently several clusters of outbreaks in neighboring counties and the state. Cyclospora is a parasite that causes intestinal illness. Infections can occur when people consume contaminated food, primarily fresh produce, and water. Thoroughly washing all fresh produce reduces the risk of infection.

**GAAA UPDATES**

- On Aug. 5-9, GAAA staff attended training for possible terrorist attack scenarios with local police, fire and EMS departments.
- On Aug. 10, GAAA provided stand-by assistance for a Latino concert on East Beach. Four units were used.
- On Aug. 17, GAAA participated in a job fair in Alvin.
- On Aug. 17, GAAA participated in a community outreach back-to-school event at Coastal Community Federal Credit Union.
- On Aug. 17, GAAA participated in a community outreach back-to-school event at Sea Side Village Apartments.
**EXECUTIVE OFFICE**
- The health district has entered into an interlocal agreement with the County of Galveston and the cities of Kemah and Clear Lake Shores to provide emergency medical services to the communities of Kemah, Clear Lake Shores and Lazy Bend. GAAA will begin providing services to these areas effective Oct. 1.
- Within the coming weeks, the health district will reach out to the county’s general counsel regarding the proposed bylaw changes submitted by the UBOH Bylaws Committee.
- The health district was recently notified by Health Resources and Services Administrative (HRSA) that CHW was awarded additional grant funds of $23,172. This one-time grant supplement is to support health centers that displayed high levels of quality performance in calendar year 2018 UDS reporting and is intended to be used to continue to strengthen quality improvement activities.
- In response to a HRSA request to supply additional information related to the CY20 Federal Tort Claims Act (FTCA) redeeming application, the Coastal Governing Board has authorized entering into an agreement with Garfunkel, Wild, PC to provide technical assistance at a cost not to exceed $30,000. Additional information requested must be submitted to HRSA by Sept. 14.

**COMMUNITY OUTREACH**

*Animal Services*
- On Aug. 2, ARC hosted Movies and Meows and invited guests to watch a movie and play with kittens in the education room.
- On Aug. 9, ARC attended the CHW Community Resource Fair and offered pet adoptions and microchipping services, as well as information on ARC resources.
- On Aug. 17, ARC participated in Clear the Shelters, a nationwide adoption event. There were 89 adoptions, an all-time high for the ARC.
- On Aug. 23-24, ARC hosted its low-cost pet vaccine clinics.

*Community Health Services*
- The HIV/STD prevention team distributed 848 condoms to business drop sites.
- HIV/STD staff participated in the CHW Community Resource Fair and tested two individuals.
- Immunizations staff participated in two community outreach events.

*Epidemiology/ Public Health Emergency Preparedness (PHEP)*
- Medical Reserve Corps (MRC) staff and volunteers participated in two outreach events in August, reaching out to about 450 residents. Health district services information, as well as giveaway items, were shared.

**COMMUNICATION OFFICE**
- Website visitors – July 2019
  There were 49,523 total users in June and 46,882 new users. Pageviews totaled 132,244. Visitors stayed on the website for an average of 1 minute, 36 seconds. Visitors and pageview numbers have continued to increase since Jan. 1.
  Top pages visited, along with the number of visitors includes:
  - Beach Water Advisories: 36,405
  - Beach Water Safety – Vibrio Vulnificus: 22,661
  - Homepage: 7,252
  - Animal Resource Center: 4,297
Career Opportunities: 4,032

- In August, the health district partnered with i45NOW to feature the Women, Infants and Children (WIC) program as well as the health district’s Healthy Eating, Active Living (HEAL) initiative.

**News Releases/ Website News Posts - August**
- ARC vaccination clinics
- World Breastfeeding Week press release
- World Breastfeeding Week guest column
- National Immunizations Awareness Month press release
- National Immunizations Awareness Month guest column
- 2019 Clear the Shelters press release
- 2019 Clear the Shelters guest column

**Social Media - August**
- WIC World Breastfeeding Week Super Breastfeeding Extravaganza
- WIC Summer Meal Program
- 2019 Clear the Shelters
- Back-to-school immunizations
- Galveston County MRC meeting
- Back-to-school records
- WIC Mother’s Milk Club
- Diabetes awareness and education
- ARC vaccination clinics
- Healthy Concepts Clinic services
- Healthy Eating, Active Living (HEAL)
- #WorkWednesday
- Norovirus education
- Texting and Driving safety education
- HEAL and obesity
- Handwashing education
- Back-to-school food safety tips
- Heat safety – stay hydrated, cool and remember pets
- WIC cooking series
- GCHD blood drive
- Labor Day closures

**Videos - August**
- Pets of the Week (4)
- Employee Spotlight: Debbie Marshall

**HUMAN RESOURCES UPDATES**
July 25-Aug. 21, 2019

GCHD and GAAA Career Opportunities:

- **Employee Onboarding** – Human Resources conducted new employee orientation for the following employee(s):
  - Jessica Kowalewski – ARC Clerk/Dispatcher
  - Sherry Shultz – Human Resources Administrative Assistant
  - Bradley Starkey – GAAA Clinical Compliance Coordinator
• Job Offers – The following candidate(s) were extended job offers and have future start dates:
  o Tenesha Tuton – Clerk/Dispatcher
  o David Hall - IT Help Desk Analyst II
  o Riley Thompson – Paramedic
  o Gina McGowan – WIC Site Supervisor/Nutritionist

• Current Vacancies:
  o Public Health vacancies:
    ▪ Animal Services
      • Part-Time Animal Care Technician (4)
      • Part-Time Veterinary Technician (1)
      • Volunteer Coordinator/Adoption Counselor
    ▪ Environmental Health Services
      • Clerk
      • Environmental Investigator – Basic
    ▪ WIC
      • WIC Site Supervisor/Nutritionist
  o GAAA Field vacancies:
    ▪ EMT – Basic full-time (2)
    ▪ Advanced EMT full-time (6)
    ▪ Paramedic full-time (1)
    ▪ Team Captain (3)
    ▪ Senior Team Captain (2)

Employee Activities
• PHN Employee Wellness Activities
  o National Immunization Awareness Month, Juvenile Arthritis Awareness Month and healthy eating educational materials and displays were provided in the employee breakroom.
  o Fruit infused water is being offered every Friday.

• BeWell Committee
  o The healthy snack bar continues to be well received.
  o Staff is participating in Walk Across Texas with group walks held each Monday to encourage physical activity.
  o BeWell Committee members continue to meet monthly to plan a variety of healthy and fun events for employees.
  o A “pint for a pint” blood drive was sponsored by the public health nurses with several employees participating.
UBOH EXECUTIVE CONTRACT REPORT: August 2019

1. The Galveston County Health District and the Galveston Housing Authority entered into a two (2) year lease for the space currently occupied by the Immunizations Clinic located at 4700 Broadway, Galveston, Texas 77551, transitioning it from a month-to-month lease. The leased space includes 518 square feet and the rent will be at a price of $1.18 per square foot, totaling $611.00 per month, which is less than half the average price per square foot in the area. This lease also includes an auto-renew provision which extends the term of the lease for an additional two years with a 90-day notice of intent to extend the lease. This space will be occupied by the new Healthy Concepts Clinic.

2. The Office Supplies bid, approved for a one (1) year term beginning on July 25, 2019, was jointly awarded to Greater Houston Office Products and Quill. This agreement permits GCHD to receive discounted rates on all purchases made through these companies over the course of the next year. There was an approximate increase of 41.39% from last year due to a rise in manufacturer prices, tariff charges and changing to better quality on mechanical pencils.

3. In an effort to fulfill the charter granted in the Department of State Health Services (“DSHS”) Women, Infant and Children’s (“WIC”) Nutrition Grant for the 2020 fiscal year, the District has entered into billboard and radio advertising agreements with SignAd and iHeart media. The SignAd contract includes $5,000 for digital billboards and $14,000 for traditional billboards. The iHeart agreement includes Facebook and location-based displays for a total of $15,000.

4. The Health District’s Office of Environmental Health Programs entered into a Water Pollution and Abatement Contract for the 2020 fiscal year with the following municipalities and water districts (note that additional parties are expected to execute comparable agreements with the Health District):
   a. the Galveston County Water Control and Improvement District #1;
   b. the City of Jamaica Beach;
   c. the City of Hitchcock;
   d. the City of Dickinson.

Through these agreements, environmental health inspectors provide the aforementioned groups with services including complaint investigations, both spot and comprehensive inspections of publicly owned treatment works (POTWs), grease trap inspections, and the collection and lab testing of surface water samples.

5. The annual renewal for the Animal Resource Center’s Chameleon software was executed on July 30, 2019 for use throughout the Animal Services Division.

6. On August 6, 2019 the Galveston County Health District negotiated and entered an Agreement with Verizon Connect for fleet GPS use.

Back to Agenda
United Board of Health
August 2019
Item #8
Overview of Public Health Accreditation Board Standards and Approval of
Proposed Next Steps
Public Health Accreditation Board

Galveston County Health District
United Board of Health Kick-off
August 2019
What is Public Health Accreditation?

The PHAB process fosters health departments’ commitment to quality improvement, performance management, accountability, transparency, and the capacity to deliver the Ten Essential Public Health Services.
Purpose

The purpose of accreditation and the foundation behind the standards is quality improvement.

*We commit to developing the culture and working toward an organization that considers quality in all of its functions, processes, programs, and capabilities.*
So...Why seek Accreditation?

We want GCHD to be:

• Responsive to change
• Identify successes and opportunities for improvement
• Gain recognition and credibility
• A platform for culture of continuous quality improvement
• Means for accountability
• Energizes the staff
• Increases the understanding and impact of public health
• Initiates, advances, and develops stronger partnerships and community involvement
• Competitiveness for funding opportunities
Introduction

In 2011, NACCHO launched a voluntary national accreditation program for public health departments with the goal of improving and protecting the public’s health by advancing performance improvements. As of October 2014, 14 health departments had earned the designation of accredited, which requires cities as small as a population of 50,000 to be included.

In April 2014, the National Association of County and City Health Officials (NACCHO) conducted a survey of accredited local health departments (LHD). The objectives were to develop a performance measurement tool to enable LHDs to measure the impact of accreditation on their organization and to identify specific outcomes that result from accreditation.

Methods

When the survey was developed, the survey was piloted with a group of six LHDs to refine the questions and ensure that the survey was easy to complete. The survey included 40 questions, which were divided into four sections: organizational structure and operations, external funding, health department strategic directions, and increased support from governing entity.

The survey included 40 questions, which were divided into four sections: organizational structure and operations, external funding, health department strategic directions, and increased support from governing entity. The survey was completed by 37 LHDs, with a response rate of 70%.

FIGURE 1: Percent of Respondents Who Report Experiencing Benefits of the Accreditation Process

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Experienced slightly</th>
<th>Experienced significantly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost savings to health department</td>
<td>21.6%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Change in clinical services offered</td>
<td>18.9%</td>
<td>10%</td>
</tr>
<tr>
<td>Organizational structure simplified (i.e., departments merged/separated)</td>
<td>21.6%</td>
<td>18.9%</td>
</tr>
<tr>
<td>External funding received</td>
<td>29.7%</td>
<td>13.5%</td>
</tr>
<tr>
<td>Change in population health services offered</td>
<td>32.4%</td>
<td>16.2%</td>
</tr>
<tr>
<td>External funding opportunities applied for</td>
<td>37.8%</td>
<td>13.5%</td>
</tr>
<tr>
<td>Additional internal funding allocated to PI</td>
<td>21.6%</td>
<td>16.2%</td>
</tr>
<tr>
<td>Change in health department strategic directions</td>
<td>16.2%</td>
<td>48.6%</td>
</tr>
<tr>
<td>Increased support from governing entity</td>
<td>40.5%</td>
<td>43.2%</td>
</tr>
<tr>
<td>Increased number of actively engaged community partners</td>
<td>48.6%</td>
<td>37.8%</td>
</tr>
<tr>
<td>More community support/understanding of the local health department in general</td>
<td>48.6%</td>
<td>37.8%</td>
</tr>
<tr>
<td>Reduced barriers between silos or program areas</td>
<td>37.8%</td>
<td>48.6%</td>
</tr>
<tr>
<td>Increased peer-learning opportunities for staff involved with accreditation</td>
<td>13.5%</td>
<td>75.7%</td>
</tr>
<tr>
<td>Increased staff understanding of QI</td>
<td>18.9%</td>
<td>73%</td>
</tr>
<tr>
<td>Increased capacity to address deficiencies of the health department</td>
<td>35.1%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Increased data-driven decision-making</td>
<td>35.1%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Increased staff understanding of services offered by the health department</td>
<td>37.8%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Movement toward a culture of QI among staff</td>
<td>8.1%</td>
<td>86.5%</td>
</tr>
<tr>
<td>Increased staff understanding of public health</td>
<td>16.2%</td>
<td>81.1%</td>
</tr>
<tr>
<td>Improvements in agency processes</td>
<td>27.0%</td>
<td>70.3%</td>
</tr>
</tbody>
</table>

n=37
Public Health Services · Emergency Medical Services · Animal Resource Center · Coastal Health & Wellness

Protecting and promoting the optimal health and well-being of Galveston County.
Is this a big project?
Yes!

Accreditation looks at:

- Leadership
- Planning
- Community engagement
- Customer focus
- Workforce development
- Evaluation and quality improvement
- Governance
Application

• Six months
• Describes the department
• Commits to the process
• Contractual elements
• Payment of Fees

Plans and Systems

• Community Health Assessment
• Community Health Improvement Plan
• Health District Strategic Plan
• Workforce Development
• Emergency Operations
• Quality Improvement
• Performance Mgmt. System
• Branding Strategy
Twelve Domains:

1. Conduct assessments focused on population health status and health issues facing the community
2. Investigate health problems and environmental public health hazards to protect the community
3. Inform and educate about public health issues and functions
4. Engage with the community to identify and solve health problems
5. Develop public health policies and plans
6. Enforce public health laws and regulations
7. Promote strategies to improve access to healthcare services
8. Maintain a competent public health workforce
9. Evaluate and continuously improve processes, programs, and interventions
10. Contribute to and apply the evidence base of public health
11. Maintain administrative and management capacity
12. Build a strong and effective relationship with governing entity
What’s in store for GCHD?

Development or Re-Discovery of our Capabilities

- Community Health Assessment
- Health Improvement Plan
- Strategic Health Plan
- Workforce Development
- Quality Improvement Systems
- Performance Management System
GCHD Accreditation Timeline

- **SHP Adopted**
  - Mar. 2017

- **A-Team Identified, PHAB Orientation**
  - Jul. 2019

- **UBOH Presentation**
  - CHA/CHIP plan, PHAB
  - Work plan created, QI
  - Plans created
  - Aug. 2019

- **Employee Kick-off Townhall**
  - Oct. 2019

- **EPHAB Registration**
  - Submit PHAB Application and fees
  - Nov. 2019

- **Selection and uploading of documentation**
  - Jun. 2020

- **PHAB Site Visit**
  - Sep. 2020

- **Submission of Application with all Documentation**
  - Aug. 2020

- **First PHAB Annual Report**
  - Nov. 2020

- **Accreditation!!**
  - 2021
Are you ready to be PHABulous?! 

Accreditation provides a framework for a health department to:
- Identify performance improvement opportunities,
- Improve management,
- Develop leadership, and
- Improve relationships with the community.

The process is one that will challenge the health department to think about what business it does and how it does that business.
# Standards: An Overview

## Assess

**Domain 1:** Conduct and disseminate assessments focused on population health status and public health issues facing the community

- **Standard 1.1:** Participate in or Lead a Collaborative Process Resulting in a Comprehensive Community Health Assessment
- **Standard 1.2:** Collect and Maintain Reliable, Comparable, and Valid Data that Provide Information on Conditions of Public Health Importance and on the Health Status of the Population
- **Standard 1.3:** Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors that Affect the Public’s Health
- **Standard 1.4:** Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Interventions

## Investigate

**Domain 2:** Investigate health problems and environmental public health hazards to protect the community

- **Standard 2.1:** Conduct Timely Investigations of Health Problems and Environmental Public Health Hazards
- **Standard 2.2:** Contain/Mitigate Health Problems and Environmental Public Health Hazards
- **Standard 2.3:** Ensure Access to Laboratory and Epidemiologic/Environmental Public Health Expertise and Capacity to Investigate and Contain/Mitigate Public Health Problems and Environmental Public Health Hazards
- **Standard 2.4:** Maintain a Plan with Policies and Procedures for Urgent and Non-Urgent Communications

## Inform & Educate

**Domain 3:** Inform and educate about public health issues and functions

- **Standard 3.1:** Provide Health Education and Health Promotion Policies, Programs, Processes, and Interventions to Support Prevention and Wellness
- **Standard 3.2:** Provide Information on Public Health Issues and Public Health Functions Through Multiple Methods to a Variety of Audiences

## Community Engagement

**Domain 4:** Engage with the community to identify and address health problems

- **Standard 4.1:** Engage with the Public Health System and the Community in Identifying and Addressing Health Problems through Collaborative Processes
- **Standard 4.2:** Promote the Community’s Understanding of and Support for Policies and Strategies that will Improve the Public’s Health

## Policies & Plans

**Domain 5:** Develop public health policies and plans

- **Standard 5.1:** Serve as a Primary and Expert Resource for Establishing and Maintaining Public Health Policies, Practices, and Capacity
- **Standard 5.2:** Conduct a Comprehensive Planning Process Resulting in a Tribal/State/Community Health Improvement Plan
- **Standard 5.3:** Develop and Implement a Health Department Organizational Strategic Plan
- **Standard 5.4:** Maintain an All Hazards Emergency Operations Plan

## Public Health Laws

**Domain 6:** Enforce public health laws

- **Standard 6.1:** Review Existing Laws and Work with Governing Entities and Elected/Appointed Officials to Update as Needed
- **Standard 6.2:** Educate Individuals and Organizations on the Meaning, Purpose, and Benefit of Public Health Laws and How to Comply
- **Standard 6.3:** Conduct and Monitor Public Health Enforcement Activities and Coordinate Notification of Violations among Appropriate Agencies

*Version 1.5*
**ACCESS TO CARE**

**DOMAIN 7:** Promote strategies to improve access to health care  
**Standard 7.1:** Assess Health Care Service Capacity and Access to Health Care Services  
**Standard 7.2:** Identify and Implement Strategies to Improve Access to Health Care Services

**WORKFORCE**

**DOMAIN 8:** Maintain a competent public health workforce  
**Standard 8.1:** Encourage the Development of a Sufficient Number of Qualified Public Health Workers  
**Standard 8.2:** Ensure a Competent Workforce through Assessment of Staff Competencies, the Provision of Individual Training and Professional Development, and the Provision of a Supportive Work Environment

**QUALITY IMPROVEMENT**

**DOMAIN 9:** Evaluate and continuously improve processes, programs, and interventions  
**Standard 9.1:** Use a Performance Management System to Monitor Achievement of Organizational Objectives  
**Standard 9.2:** Develop and Implement Quality Improvement Processes Integrated Into Organizational Practice, Programs, Processes, and Interventions

**EVIDENCE-BASED PRACTICES**

**DOMAIN 10:** Contribute to and apply the evidence base of public health  
**Standard 10.1:** Identify and Use the Best Available Evidence for Making Informed Public Health Practice Decisions  
**Standard 10.2:** Promote Understanding and Use of the Current Body of Research Results, Evaluations, and Evidence-Based Practices with Appropriate Audiences

**ADMINISTRATION & MANAGEMENT**

**DOMAIN 11:** Maintain administrative and management capacity  
**Standard 11.1:** Develop and Maintain an Operational Infrastructure to Support the Performance of Public Health Functions  
**Standard 11.2:** Establish Effective Financial Management Systems

**GOVERNANCE**

**DOMAIN 12:** Maintain capacity to engage the public health governing entity  
**Standard 12.1:** Maintain Current Operational Definitions and Statements of the Public Health Roles, Responsibilities, and Authorities  
**Standard 12.2:** Provide Information to the Governing Entity Regarding Public Health and the Official Responsibilities of the Health Department and of the Governing Entity  
**Standard 12.3:** Encourage the Governing Entity’s Engagement In the Public Health Department’s Overall Obligations and Responsibilities

---

The **PHAB STANDARDS** apply to all health departments—Tribal, state, local, and territorial. Standards are the required level of achievement that a health department is expected to meet. Domains are groups of standards that pertain to a broad group of public health services. The focus of the PHAB standards is “what” the health department provides in services and activities, irrespective of “how” they are provided or through what organizational structure. Please refer to the **PHAB Standards and Measures** Version 1.5 document, available at [www.phaboard.org](http://www.phaboard.org), for the full official standards, measures, required documentation, and guidance.
## Appendix 1
### PHAB SEVEN STEP ACCREDITATION PROCESS

<table>
<thead>
<tr>
<th>Seven Steps</th>
<th>Responsible Party</th>
<th>Activity</th>
<th>Time frame</th>
</tr>
</thead>
</table>
| **1. Preparation** | HD | • Learns about PHAB through PHAB website, documents, e-newsletter, etc. (recommended)  
• Conducts self-assessment against PHAB standards and measures (recommended)  
• Identifies strengths and weaknesses (recommended)  
• Addresses weaknesses (recommended) | HD determined |
| HD Accreditation Coordinator | • Completes Readiness Checklists (recommended) | HD determined |
| HD Director  
HD Accreditation Coordinator | • Completes PHAB Online Orientation | HD determined |
| **2. Registration and Application** | HD | • Registers in e-PHAB | Complete and submit no more than 90 days from start of the registration |
| PHAB | • Notifies HD that e-PHAB registration is complete and provides HD access to PHAB application | Usually within 2 weeks |
| HD Accreditation Coordinator | • Completes and submits application | No more than 6 months after receipt of access to application |
| PHAB | • Notifies HD that application is complete or notifies the health department that a revision is required | Usually within 2 weeks |
| PHAB | • Invoices the HD | Usually within 1 week |
| HD | • Submits fee to PHAB | Fee is due within 30 days of receipt of invoice |
| PHAB  
HD Accreditation Coordinator | • AC training is scheduled | In time for next scheduled training |
| HD | • AC completes training and training evaluation | Next scheduled training |
| **3. Documentation Selection and Submission** | PHAB | • Provides access to the e-PHAB module for submitting documentation | No later than 2 weeks after completion of training |
| HD Accreditation Coordinator | • Manages the selection and uploading of documentation | |
| HD | • Submits documentation to PHAB | Within 12 months of receipt of access to module for submitting documentation |
| PHAB | • Conducts Completeness Review | PHAB determined |
| HD | • Responds to Completeness Review | Within 30 days of receipt |
| 4. Site Visit | PHAB | • Selects members of Site Visit Team | PHAB determined |
| HD | • Reviews names of site visitors for potential conflicts of interest | PHAB determined |
| Site Visit Team | • Conducts Pre-site Visit Review and sends questions to HD and reopens Measures | PHAB determined |
| HD | • Responds to Pre-site Visit Review | Within 30 days of receipt |
| PHAB HD Accreditation Coordinator Site Visit Team | • Schedules Site Visit | PHAB/HD/SV team determined |
| Site Visit Team | • Conducts Site Visit | PHAB/HD determined |
| Site Visit Team | • Writes Site Visit Report  • Submits report to PHAB | 2 weeks after conclusion of visit |
| PHAB | • Reviews and edits report; submits report to Accreditation Committee | PHAB determined |
| 5. Accreditation Decision | Accreditation Committee | • Determines accreditation status: accredited or Action Plan | PHAB determined |
| HD | • If status is not “accredited,” HD develops and submits an “accreditation action plan” | 90 days from receipt of accreditation decision notification |
| PHAB Accreditation Committee | • Reviews and approves "accreditation action plan" | PHAB determined |
| HD | • If the Action Plan is not accepted, submits revised Action Plan | 60 days |
| HD | • Submits documentation of implementation of “accreditation action plan” | No more than 12 months from approval of plan by PHAB |
| 6. Annual Reports | HD | • Submits annual report to PHAB | Annually, for 5 years |
| 7. Reaccreditation | PHAB | • Sends HD notice of expiring accreditation status | PHAB determined |
| HD | • Applies for reaccreditation | |

Back to Agenda
United Board of Health
August 2019
Item #9
Presentation by Management Advisory Group (MAG) on Classification and Compensation Study
Study Goals and Objectives

✓ Perform a Compensation/Classification study for all District positions.

✓ Compare compensation to relevant labor markets/competitors.

✓ Ensure that positions performing similar work with essentially the same level of complexity, responsibility, and knowledge, are classified together.

✓ Develop a competitive classification and compensation structure.

✓ Recommend policy changes to support the compensation system.

✓ Scope included approximately 340 positions in 192 job titles.
Methodology

- Captured key employee data.
- Conducted employee sessions to explain project and their role.
- Identified jobs where recruitment and retention are concerns.
- Conducted interviews with top management and selected staff.
- Gathered salary and compensation data from competitor organizations;
- Surveyed for comparative data.
- Reviewed job questionnaire data from employees.
- Changed selected job titles to reflect work being done.
- Recommending changes to support a competitive compensation system.
- Developed implementation/transition costs.
Targeted Agencies/Employers

- Texas Dept. of Health Services
- Brazoria Co. Health Dept. TX
- Fort Bend Co. HHS Dept. TX
- Harris Co. Public Health & ES, TX
- City of Galveston, SC
- City of Texas City, TX
- City of League City, TX
- City of Pearland, TX

- Texas Comm. on Environmental Quality
- Houston, Galveston Area Council
- Univ. of TX Medical Branch (UTMB)
- City of Pearland, TX
- Galveston Co. TX
- City of La Marque, TX
- O*NET On-line
Market Survey Results

✓ Positions that appear to have competitive hiring rates:
  ✓ Sanitarians
  ✓ Epidemiologist
  ✓ IT Specialist
  ✓ Medical Aide I
  ✓ CIHCP Specialist I

✓ Positions that are extremely non-competitive:
  ✓ Consumer Health Inspectors
  ✓ Patient Services Specialist (Bi-lingual)
  ✓ Veterinary Technicians
  ✓ Financial Services Manager
  ✓ HIV/STD Manager
Recommendations

Coastal Health & Wellness Funding Source.
- 77 job titles.
- Open Ranges.
- 22 grade levels.
- Range Widths: 55% from minimum to maximum.

GAAA (EMS) Funding Source.
- 18 job titles.
- Open Ranges.
- 15 grade levels.
- Range Widths: 55% from minimum to maximum.

General Fund
- 97 job titles
- Open Ranges.
- 27 grade levels.
- Range Widths: 55% from minimum to maximum.

➢ All Plans have 5% between grades
Implementation

✓ The recommended implementation target date is set at October 1, 2019.

✓ A 2.8% across the board is applied first.

✓ Then, of the 340 employees covered in this study, 116 employees would need adjustment to the proposed minimums.

✓ Implementation costs on the following pages:
## Estimated Annualized Costs: Coastal Health & Wellness

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.8% across the board first</td>
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<tr>
<td>Adjustment to Minimums (48 out of 111)</td>
<td>$81,238</td>
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<tr>
<td>Total Annualized Adjustments:</td>
<td>$248,827</td>
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<tr>
<td>Change in Total Payroll for included positions</td>
<td>4.16%</td>
</tr>
</tbody>
</table>

© Management Advisory Group, Inc. 2019
### Estimated Annualized Costs: GAAA (EMS)

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.8% across the board first</td>
<td>$110,332</td>
</tr>
<tr>
<td>Adjustment to Minimums (12 out of 96)</td>
<td>$32,414</td>
</tr>
<tr>
<td>Total Annualized Adjustments:</td>
<td>$142,746</td>
</tr>
<tr>
<td>Change in Total Payroll for included positions</td>
<td>3.25%</td>
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</table>
### Estimated Annualized Costs: General Fund

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>2.8% across the board first</td>
<td>$181,057</td>
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<tr>
<td>Adjustment to Minimums (56 out of 133)</td>
<td>$100,758</td>
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<tr>
<td>Total Annualized Adjustments:</td>
<td>$281,815</td>
</tr>
<tr>
<td>Change in Total Payroll for included positions</td>
<td>4.30%</td>
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</table>
Recommendations on Policies

✓ MAG has provided a draft of personnel policies for:

✓ Reclassification
✓ Promotion
✓ Lateral Transfer
✓ Demotion
✓ Temporary Assignment
✓ Hiring
✓ Addressing employees who “max out”.

✓ The suggested policies reflect best practices in the field of HR.
Transition Plan

Next steps include the following:

✓ Adopt the classification levels and individual assignments.

✓ Adopt the new compensation plan structure and ranges.

✓ Implement new structure and equity adjustments effective October 1, 2019.

Back to Agenda
United Board of Health
August 2019
Item #10
Consider for Approval July 2019 Financial Report
GALVESTON COUNTY HEALTH DISTRICT

United Board of Health

For the Period Ending July 31, 2019

August 28, 2019

GCHD Board Room | 9850-A Emmett F. Lowry Expy. | Texas City, TX 77591
GF - BALANCE SHEET  

as of July 31, 2019

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>Current Month Jul-19</th>
<th>Prior Month Jun-19</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash &amp; Cash Equivalents</td>
<td>3,908,202</td>
<td>4,382,989</td>
<td>(474,787)</td>
</tr>
<tr>
<td>Accounts Receivable</td>
<td>2,560,153</td>
<td>687,289</td>
<td>1,872,864</td>
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<tr>
<td>Pre-Paid Expenses</td>
<td>55,924</td>
<td>64,885</td>
<td>(8,961)</td>
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<tr>
<td>Other</td>
<td>37,062</td>
<td>27,774</td>
<td>9,288</td>
</tr>
<tr>
<td>Due To / From</td>
<td>(12,636)</td>
<td>27,880</td>
<td>(40,516)</td>
</tr>
<tr>
<td>Total Assets</td>
<td>$6,548,705</td>
<td>$5,190,817</td>
<td>$1,357,888</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts Payable</td>
<td>257,631</td>
<td>151,694</td>
<td>105,937</td>
</tr>
<tr>
<td>Personnel</td>
<td>163,365</td>
<td>331,336</td>
<td>(167,970)</td>
</tr>
<tr>
<td>Deferred Revenues</td>
<td>1,331,905</td>
<td>58,255</td>
<td>1,273,650</td>
</tr>
<tr>
<td>Other</td>
<td>3,989</td>
<td>4,395</td>
<td>(405)</td>
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<tr>
<td>Due to Galveston County</td>
<td>91,214</td>
<td>0</td>
<td>91,214</td>
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<tr>
<td>Total Liabilities</td>
<td>$1,848,105</td>
<td>$545,680</td>
<td>$1,302,425</td>
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</table>

<table>
<thead>
<tr>
<th>FUND BALANCE</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior Year Fund Balance</td>
<td>4,387,481</td>
<td>4,387,481</td>
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<tr>
<td>Current Change</td>
<td>313,119</td>
<td>257,656</td>
<td>55,463</td>
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<tr>
<td>Total Fund Balance</td>
<td>$4,700,600</td>
<td>$4,645,137</td>
<td>$55,463</td>
</tr>
</tbody>
</table>

| TOTAL LIABILITIES & FUND BALANCE | $6,548,705 | $5,190,817 | $1,357,888 |

GF - REVENUE & EXPENSES  

as of July 31, 2019

<table>
<thead>
<tr>
<th>Actual</th>
<th>Budgeted</th>
<th>PTD Budget Variance</th>
<th>YTD Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Month Jul-19</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County Revenue</td>
<td>594,216</td>
<td>594,218</td>
<td>(2)</td>
</tr>
<tr>
<td>Grant Revenue</td>
<td>296,936</td>
<td>278,522</td>
<td>18,414</td>
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<tr>
<td>Contract Revenue</td>
<td>45,182</td>
<td>43,859</td>
<td>1,323</td>
</tr>
<tr>
<td>Program Revenue</td>
<td>137,728</td>
<td>102,708</td>
<td>35,020</td>
</tr>
<tr>
<td>Interest Revenue</td>
<td>6,467</td>
<td>2,500</td>
<td>3,967</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>37,845</td>
<td>35,724</td>
<td>2,121</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>$1,118,374</td>
<td>$1,057,531</td>
<td>$60,843</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>$247,421</td>
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<table>
<thead>
<tr>
<th>EXPENSES</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>535,129</td>
<td>553,110</td>
<td>17,981</td>
</tr>
<tr>
<td>Contractual</td>
<td>352,989</td>
<td>361,928</td>
<td>9,090</td>
</tr>
<tr>
<td>Supplies</td>
<td>56,213</td>
<td>34,542</td>
<td>21,671</td>
</tr>
<tr>
<td>Travel</td>
<td>7,094</td>
<td>12,005</td>
<td>4,911</td>
</tr>
<tr>
<td>Equipment/Capital</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>111,556</td>
<td>133,955</td>
<td>22,399</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$1,062,911</td>
<td>$1,095,540</td>
<td>$32,629</td>
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<td></td>
<td></td>
<td></td>
<td>$340,799</td>
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</table>

<table>
<thead>
<tr>
<th>CHANGE IN NET ASSETS</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$55,463</td>
<td>(38,009)</td>
<td>$93,472</td>
<td>$588,220</td>
</tr>
</tbody>
</table>

HIGHLIGHTS

- MTD net increase in fund balance of $55,463.
- MTD revenues were $61k higher than budgeted due mostly to increased grant ($18k), vital statistics ($13k), food services ($9k), immunization ($5k), septic tank ($5k), interest ($4k) and animal services ($4k) revenues.
- YTD revenues were $247k higher than budgeted due to mostly increased grant ($82k), interest ($33k), animal services ($23k), food services ($23k), vital statistics ($20k), immunization ($20k), sale of fixed asset ($16k), insurance proceeds ($11k), and admin fee ($9k) revenues.
- MTD expenses were $33k lower than budgeted due mainly to decreased personnel costs, as well as advertising expense which hit in prior months but was budgeted evenly. These offset Zika operating supplies which were purchased in bulk this month.
- YTD expenses were $341k lower than budgeted due to lower personnel costs which offset settlement payouts, and ARC vehicle purchase which was budgeted last fiscal year.
- YTD increase in fund balance of $313,119. Total fund balance of $4.7M as of 7/31/19.
GF Actual Revenue & Expense Trends with Change in Net Assets

GF Actual Revenue vs Budget Trends with Variance

GF Actual Expenses vs Budget Trends with Variance
GAAA - BALANCE SHEET  as of July 31, 2019

### ASSETS

<table>
<thead>
<tr>
<th></th>
<th>Current Month Jul-19</th>
<th>Prior Month Jun-19</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash &amp; Cash Equivalents</td>
<td>4,713,604</td>
<td>4,900,644</td>
<td>($187,040)</td>
</tr>
<tr>
<td>Accounts Receivable</td>
<td>743,954</td>
<td>377,491</td>
<td>366,464</td>
</tr>
<tr>
<td>Pre-Paid Expenses</td>
<td>61,956</td>
<td>85,648</td>
<td>($23,692)</td>
</tr>
<tr>
<td>Other</td>
<td>395</td>
<td>2,823</td>
<td>($2,428)</td>
</tr>
<tr>
<td>Due To / From</td>
<td>($30,833)</td>
<td>($2,706)</td>
<td>($28,128)</td>
</tr>
<tr>
<td>Total Assets</td>
<td>$5,489,076</td>
<td>$5,363,900</td>
<td>$125,176</td>
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</tbody>
</table>

### LIABILITIES

<table>
<thead>
<tr>
<th></th>
<th>Current Month Jul-19</th>
<th>Prior Month Jun-19</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts Payable</td>
<td>66,621</td>
<td>37,857</td>
<td>28,765</td>
</tr>
<tr>
<td>Personnel</td>
<td>122,954</td>
<td>257,396</td>
<td>($134,441)</td>
</tr>
<tr>
<td>Deferred Revenues</td>
<td>262,770</td>
<td>10,417</td>
<td>252,353</td>
</tr>
<tr>
<td>Total Liabilities</td>
<td>$452,345</td>
<td>$305,669</td>
<td>$146,676</td>
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### FUND BALANCE

<table>
<thead>
<tr>
<th></th>
<th>Current Month Jul-19</th>
<th>Prior Month Jun-19</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior Year Fund Balance</td>
<td>4,902,462</td>
<td>4,902,462</td>
<td>0</td>
</tr>
<tr>
<td>Current Change</td>
<td>134,268</td>
<td>155,768</td>
<td>($21,500)</td>
</tr>
<tr>
<td>Total Fund Balance</td>
<td>$5,036,731</td>
<td>$5,058,231</td>
<td>($21,500)</td>
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### TOTAL LIABILITIES & FUND BALANCE

<table>
<thead>
<tr>
<th></th>
<th>Current Month Jul-19</th>
<th>Prior Month Jun-19</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$5,489,076</td>
<td>$5,363,900</td>
<td>$125,176</td>
</tr>
</tbody>
</table>

GAAA - REVENUE & EXPENSES  as of July 31, 2019

### REVENUE

<table>
<thead>
<tr>
<th></th>
<th>Actual Jul-19</th>
<th>Budgeted Jul-19</th>
<th>PTD Variance</th>
<th>YTD Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Revenue</td>
<td>68,676</td>
<td>68,677</td>
<td>(1)</td>
<td>0</td>
</tr>
<tr>
<td>Contract Revenue</td>
<td>92,699</td>
<td>85,076</td>
<td>7,623</td>
<td>90,823</td>
</tr>
<tr>
<td>Program Revenue</td>
<td>398,945</td>
<td>340,482</td>
<td>58,463</td>
<td>(214,856)</td>
</tr>
<tr>
<td>Interest Income</td>
<td>8,121</td>
<td>3,167</td>
<td>4,954</td>
<td>38,927</td>
</tr>
<tr>
<td>Other Revenue</td>
<td>17,858</td>
<td>17,917</td>
<td>(59)</td>
<td>81,368</td>
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<td>Total Revenue</td>
<td>$586,300</td>
<td>$515,319</td>
<td>$70,981</td>
<td>($3,738)</td>
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</table>

### EXPENSES

<table>
<thead>
<tr>
<th></th>
<th>Actual</th>
<th>Budgeted</th>
<th>PTD Variance</th>
<th>YTD Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>384,719</td>
<td>419,217</td>
<td>34,498</td>
<td>463,678</td>
</tr>
<tr>
<td>Contractual</td>
<td>24,847</td>
<td>22,008</td>
<td>(2,839)</td>
<td>(193)</td>
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<tr>
<td>Supplies</td>
<td>28,274</td>
<td>28,671</td>
<td>397</td>
<td>78,315</td>
</tr>
<tr>
<td>Travel</td>
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<td>1,110</td>
<td>1,110</td>
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<td>Equipment/Capital</td>
<td>111,309</td>
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<td>(111,309)</td>
<td>82,207</td>
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<tr>
<td>Other</td>
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<td>67,787</td>
<td>9,136</td>
<td>40,691</td>
</tr>
<tr>
<td>Bad Debt</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$607,800</td>
<td>$538,793</td>
<td>($69,007)</td>
<td>$672,975</td>
</tr>
</tbody>
</table>

### CHANGE IN NET ASSETS

<table>
<thead>
<tr>
<th></th>
<th>Actual</th>
<th>Budgeted</th>
<th>Increase (Decrease)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>($21,500)</td>
<td>($23,474)</td>
<td>$1,974</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>$669,237</td>
</tr>
</tbody>
</table>

### HIGHLIGHTS

- MTD net decrease in fund balance of $21,500.
- MTD revenues were $71k higher than budgeted due mostly to higher Medicare ($38k) and private insurance ($32k) revenue.
- YTD revenues were lower than budgeted by $4k due mostly to lower Medicare revenue ($473k) which offset higher private insurance ($199k), GAAA contract ($91k), Medicaid ($51k), FEMA ($46k), interest ($39k), sale of assets ($24k), and patient fee ($20k) revenues.
- MTD expenses were $69k higher than budgeted due to an ambulance remount that was expensed this month but was budgeted last month. This was offset by lower personnel costs.
- YTD expenses were $673k lower than budgeted due mostly to lower personnel and supply costs.
- YTD increase in fund balance of $134,268. Total fund balance of $5.04M as of 7/31/19.
# GAAA Actual Revenue & Expense Trends with Change in Net Assets

<table>
<thead>
<tr>
<th>Month</th>
<th>Revenue</th>
<th>Expenses</th>
<th>Net Asset Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul-18</td>
<td>$0</td>
<td>$100,000</td>
<td>$0</td>
</tr>
<tr>
<td>Aug-18</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Sep-18</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Oct-18</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Nov-18</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Dec-18</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Jan-19</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Feb-19</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Mar-19</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Apr-19</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>May-19</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Jun-19</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Jul-19</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

# GAAA Actual Revenue vs Budget Trends with Variance

<table>
<thead>
<tr>
<th>Month</th>
<th>Actual Revenue</th>
<th>Budgeted Revenue</th>
<th>Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul-18</td>
<td>$0</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Aug-18</td>
<td>$0</td>
<td>$100,000</td>
<td>$100,000</td>
</tr>
<tr>
<td>Sep-18</td>
<td>$0</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>Oct-18</td>
<td>$0</td>
<td>$200,000</td>
<td>$200,000</td>
</tr>
<tr>
<td>Nov-18</td>
<td>$0</td>
<td>$250,000</td>
<td>$250,000</td>
</tr>
<tr>
<td>Dec-18</td>
<td>$0</td>
<td>$300,000</td>
<td>$300,000</td>
</tr>
<tr>
<td>Jan-19</td>
<td>$0</td>
<td>$350,000</td>
<td>$350,000</td>
</tr>
<tr>
<td>Feb-19</td>
<td>$0</td>
<td>$400,000</td>
<td>$400,000</td>
</tr>
<tr>
<td>Mar-19</td>
<td>$0</td>
<td>$450,000</td>
<td>$450,000</td>
</tr>
<tr>
<td>Apr-19</td>
<td>$0</td>
<td>$500,000</td>
<td>$500,000</td>
</tr>
<tr>
<td>May-19</td>
<td>$0</td>
<td>$550,000</td>
<td>$550,000</td>
</tr>
<tr>
<td>Jun-19</td>
<td>$0</td>
<td>$600,000</td>
<td>$600,000</td>
</tr>
<tr>
<td>Jul-19</td>
<td>$0</td>
<td>$650,000</td>
<td>$650,000</td>
</tr>
</tbody>
</table>

# GAAA Actual Expenses vs Budget Trends with Variance

<table>
<thead>
<tr>
<th>Month</th>
<th>Actual Expenses</th>
<th>Budgeted Expenses</th>
<th>Budget Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul-18</td>
<td>$0</td>
<td>$100,000</td>
<td>$100,000</td>
</tr>
<tr>
<td>Aug-18</td>
<td>$0</td>
<td>$150,000</td>
<td>$150,000</td>
</tr>
<tr>
<td>Sep-18</td>
<td>$0</td>
<td>$200,000</td>
<td>$200,000</td>
</tr>
<tr>
<td>Oct-18</td>
<td>$0</td>
<td>$250,000</td>
<td>$250,000</td>
</tr>
<tr>
<td>Nov-18</td>
<td>$0</td>
<td>$300,000</td>
<td>$300,000</td>
</tr>
<tr>
<td>Dec-18</td>
<td>$0</td>
<td>$350,000</td>
<td>$350,000</td>
</tr>
<tr>
<td>Jan-19</td>
<td>$0</td>
<td>$400,000</td>
<td>$400,000</td>
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<tr>
<td>Feb-19</td>
<td>$0</td>
<td>$450,000</td>
<td>$450,000</td>
</tr>
<tr>
<td>Mar-19</td>
<td>$0</td>
<td>$500,000</td>
<td>$500,000</td>
</tr>
<tr>
<td>Apr-19</td>
<td>$0</td>
<td>$550,000</td>
<td>$550,000</td>
</tr>
<tr>
<td>May-19</td>
<td>$0</td>
<td>$600,000</td>
<td>$600,000</td>
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<tr>
<td>Jun-19</td>
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<tr>
<td>Jul-19</td>
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<tr>
<td>Fund</td>
<td>Agency</td>
<td>Grant</td>
<td>Term</td>
</tr>
<tr>
<td>------</td>
<td>--------</td>
<td>-------------------------------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>TB Prevention Control - State</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>TB Prevention Control - Fed</td>
<td>01/01/19 - 12/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>STD/HIV</td>
<td>01/01/19 - 12/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>HIV Surveillance</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>HIV Prevention</td>
<td>01/01/19 - 12/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Immunizations</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>NACCHO</td>
<td>Medical Reserve Corps</td>
<td>02/03/15 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>PHEP - Cities Readiness Initiative</td>
<td>07/01/19 - 06/30/20</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>PHEP - All Hazards</td>
<td>07/01/19 - 06/30/20</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>Breast &amp; Cervical Cancer Services</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Local Public Health Services</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Zika - Epi and Laboratory Capacity</td>
<td>03/01/17 - 07/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Zika - Vector Control</td>
<td>03/01/17 - 07/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>WIC - Admin</td>
<td>10/01/18 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>WIC - Breast Feeding Peer Counselor</td>
<td>10/01/18 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>WIC - Lactation Consultant</td>
<td>10/01/18 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>WIC - Registered Dietitian</td>
<td>10/01/18 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>HHSC</td>
<td>WIC - Extra Funding</td>
<td>10/01/18 - 09/30/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Infectious Disease Surveillance</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Hurricane Crisis - Foodborne Disease</td>
<td>01/01/19 - 06/30/20</td>
</tr>
<tr>
<td>GF</td>
<td>DSHS</td>
<td>Hurricane Crisis - Imm Cold Chain</td>
<td>01/01/19 - 06/30/20</td>
</tr>
<tr>
<td>GF</td>
<td>DFEET</td>
<td>D’Feet Breast Cancer</td>
<td>04/01/19 - 03/31/20</td>
</tr>
<tr>
<td>GF</td>
<td>TCEQ</td>
<td>Local Air Program</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>TCEQ</td>
<td>Whole Air Monitoring (Biowatch)</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GF</td>
<td>GLO</td>
<td>Beach Watch</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>GAAA</td>
<td>RAC</td>
<td>EMS County Assistance</td>
<td>05/01/18 - 08/31/19</td>
</tr>
<tr>
<td>CHW</td>
<td>HHSC</td>
<td>Title V Child Health and Dental</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>CHW</td>
<td>HRSA</td>
<td>Health Center Base Program</td>
<td>04/01/19 - 03/31/20</td>
</tr>
<tr>
<td>CHW</td>
<td>HRSA</td>
<td>Substance Use Disorder-Mental Health</td>
<td>09/01/18 - 08/31/19</td>
</tr>
<tr>
<td>CHW</td>
<td>HRSA</td>
<td>Substance Use Disorder-Mental Health</td>
<td>09/01/18 - 08/31/19</td>
</tr>
</tbody>
</table>

**Agency Acronym Key:**
- **DSHS** - Department of State Health Services
- **GLO** - General Land Office
- **HHSC** - Health and Human Services Commission
- **HRSA** - Health Resources and Services Administration
- **NACCHO** - National Association of County and City Health Officials
- **RAC** - Regional Advisory Council
- **TCEQ** - Texas Commission on Environmental Quality

**Current Grant Listing**
*as of July 31, 2019*
United Board of Health
August 2019
Item #11
Consider for Approval the FY20 Fee Schedules for the Following Programs:
   a) Vital Statistics
   b) Environmental Fees
# Vital Statistic Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
</table>
| Full Size Birth Certificate | Long form birth certificate format that contains all birth information; used most often to obtain a passport for a person born at home and/or before 1964. It's also typically required for purposes of dual citizenship, Indian Registry and immigration. | Texas Health and Safety Code Title 3. Chapter 191.0045. FEES.   
(d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h). | $23.00      |
| Wallet Size Birth Certificate | Small form birth certificate format; satisfies many purposes, including registering a child for school or sports. | Texas Health and Safety Code Title 3. Chapter 191.0045. FEES.   
(d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h). | $23.00      |
## Vital Statistic Services Fees

### Effective October 1, 2019

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstract Size Birth Certificate</td>
<td>Short or abstract birth certificate format most commonly issued; satisfies most purposes, including registering a child for school or sports, obtaining a passport for a person born after 1963 if born in a hospital and obtaining a driver license in most states.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$23.00</td>
</tr>
<tr>
<td>Search or Verification for Birth</td>
<td>A process of looking or confirming the birth of an individual. Verification letter states whether or not the record of a birth was filed with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (a) The bureau of vital statistics may charge fees for providing services to the public and performing other activities in connection with maintenance of the vital statistics system, including: (1) performing searches of birth, death, fetal death, marriage, divorce, annulment, and other records.</td>
<td>$23.00</td>
</tr>
<tr>
<td>Full Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that full size certificate may be placed into for protection.</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$2.00</td>
</tr>
<tr>
<td>Wallet Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that wallet size certificate may be placed into for protection</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$1.00</td>
</tr>
</tbody>
</table>
## Vital Statistic Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstract Size Birth Certificate Plastic Pouch (Envelope)</td>
<td>Plastic pouch that abstract size certificate may be placed into for protection</td>
<td>The proposed fees are based on information regarding resale costs in other counties.</td>
<td>$1.50</td>
</tr>
<tr>
<td>Death Certificate</td>
<td>A certified copy of a death record; provides legal proof of a death registered with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (d) A local registrar or county clerk who issues a certified copy of a birth or death certificate shall charge the same fees as charged by the bureau of vital statistics, including the additional fee required under Subsection (e), except as provided by Subsections (g) and (h).</td>
<td>$21.00</td>
</tr>
<tr>
<td>Death Certificate: Each Additional Copy</td>
<td>Each additional copy of the death certificate must be ordered at the same time.</td>
<td></td>
<td>$4.00</td>
</tr>
<tr>
<td>Search or Verification Fee for Death</td>
<td>A process of looking or confirming the death of an individual. Verification letter states whether or not the record of a death was filed with the State of Texas.</td>
<td>Texas Health and Safety Code Title 3. Chapter 191.0045. FEES. (a) The bureau of vital statistics may charge fees for providing services to the public and performing other activities in connection with maintenance of the vital statistics system, including: marriage, divorce, annulment, and other records.</td>
<td>$21.00</td>
</tr>
</tbody>
</table>
# Vital Statistic Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Notary:</strong> Acknowledgement of proof (1\textsuperscript{st} Signature)</td>
<td>A formal declaration before an authorized official, such as a notary public, by someone who signs a document and confirms that the signature is authentic. Also, the certificate of the officer on such instrument indicating that the document has been so acknowledged.</td>
<td>The maximum fee a Texas Notary Public or its employer may charge for his/her services is $6.00. Texas Government Code Section 406.024 specifies the maximum fees for an official act that is performed by a notary public.</td>
<td>$6.00</td>
</tr>
<tr>
<td><strong>Notary:</strong> Acknowledgement of proof, each additional signature</td>
<td></td>
<td></td>
<td>$1.00</td>
</tr>
<tr>
<td><strong>Administering Oath or Affirmation</strong></td>
<td>A solemn declaration, accompanied by a swearing to God or a revered person or thing, that one’s statement is true or that one will be bound to a promise. The person making the oath implicitly invites punishment if the statement is untrue or the promise is broken. The act of affirming the truth of a document, not an oath. <em>I solemnly affirm and declare the foregoing to be a true statement.</em></td>
<td>The maximum fee a Texas Notary Public or its employer may charge for his/her services is $6.00. Texas Government Code Section 406.024 specifies the maximum fees for an official act that is performed by a notary public.</td>
<td>$6.00</td>
</tr>
</tbody>
</table>
## Vital Statistic Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Description</th>
<th>Fee Basis</th>
<th>Current Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expedited fee</td>
<td>Expedited services is available for birth and death certificates</td>
<td>The expedited service fee ensures the request will be processed the same day of receipt. The charge for the expedited service is $6.00 (fee does not include the cost of the document)</td>
<td>$6.00</td>
</tr>
</tbody>
</table>
Environmental Health Services Fees

Effective October 1, 2019

Proposed Consumer Health – Food Service Establishments – Permitting, Inspections and Training

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Risk Food Permit</td>
<td>$300.00</td>
<td>Permit Fee for high risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
<tr>
<td></td>
<td>$350.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medium Risk Food Permit</td>
<td>$275.00</td>
<td>Permit Fee for medium risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
<tr>
<td>Low Risk Food Permit</td>
<td>$250.00</td>
<td>Permit Fee for low risk food establishments</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
<tr>
<td>Timely- Temporary Food Permit</td>
<td>$75.00</td>
<td>Permit fee for temporary food establishments submitted at least two business days before event (fee waived for non-profits)</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
</tbody>
</table>
# Environmental Health Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Untimely - Temporary Food Permit</td>
<td>$100.00  $75.00 + $25.00 administrative processing fee</td>
<td>Permit fee for temporary food establishments submitted less than two business days before event (Non-profits do not pay the permit fee; however, they are responsible for administrative processing fee)</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $200.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
<tr>
<td>Expediated - Temporary Food Permit</td>
<td>$250.00  $75.00 + $175.00 administrative fee to expedite the permit</td>
<td>Permit Fee for temporary food establishments permitted on the day of the event (Non-profits do not pay the permit fee; however, they are responsible for administrative fee to expedite)</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $300.00 for Health District food service permit fees. In compliance with H.B. No. 2755, Chapter 437.012 (b), Health and Safety Code is amended allowing the Health District to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs.</td>
</tr>
<tr>
<td>Food Service Establishment Plan Review and Construction Fee</td>
<td>Large* $225.00  Medium* $200.00  Small* $175.00</td>
<td>Fee to review acceptability of proposed food establishment plans and conduct the pre-opening inspection.</td>
<td>Chapter 437 of the Health and Safety Code allows Health Districts to review planning materials of food establishments. Administrative fee to cover cost of review and the pre-opening inspection.</td>
</tr>
<tr>
<td>Food Manager Class Registration</td>
<td>Large (&gt;1500 sq.ft.) $50.00</td>
<td>One day course designed to educate food service managers on food handling regulations</td>
<td>Food manager course for food service managers required under GCHD food establishment permitting regulation.</td>
</tr>
<tr>
<td>Food Handler Certification</td>
<td>Medium (501-1500 sq.ft.) $25.00</td>
<td>Short course for food handlers working in local restaurants.</td>
<td>Administrative fee for shorter food handler class certification.</td>
</tr>
<tr>
<td>Potentially hazardous Food Vendors at a Farmer’s Market (Annual Food Permit)</td>
<td>*Small (&lt;500 sq.ft.) $175.00</td>
<td>Fee assessed that allows vendors of farm products to operate under the Farmer’s Market permit</td>
<td>Fee required under GCHD policy on food service establishments</td>
</tr>
</tbody>
</table>
## Environmental Health Services Fees

**Effective October 1, 2019**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childcare Facility Food Permit</td>
<td>$150.00</td>
<td>Food service permit fee for child care facility that prepares food on-site</td>
<td>Chapter 437 of the Health and Safety Code allows a permit fee of no more than $150.00 for day care center food services. Amendment to Chapter 437 allows public health districts to charge a fee for issuing or renewing a permit not to exceed the amount necessary to recover district's costs. Childcare facilities are defined as a food establishment and will be subject to the permit fees approved for food establishments.</td>
</tr>
<tr>
<td>Group Day Home Inspection</td>
<td>$75.00</td>
<td>Inspection provided to assist Group day home operators in their compliance with group day home regulations.</td>
<td>General sanitation inspection provided as a service to group day homeowners. We are not required by any regulation to provide this service.</td>
</tr>
<tr>
<td>Chlorine Test Strip</td>
<td>$5.00 - 6.00</td>
<td>Test strips used to check chlorine sanitizer levels in ware-washing operations.</td>
<td>Provided for public and staff to help measure Chlorine sanitizer levels.</td>
</tr>
<tr>
<td>Food Service Late Fee</td>
<td>$50.00 if not paid by due date</td>
<td>Administrative late fee assessed for all food permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
<tr>
<td>Food Service Late Fee</td>
<td>$100.00 if not paid 30 days after due date</td>
<td>Administrative late fee assessed for all food permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
</tbody>
</table>
# Environmental Health Services Fees

**Consumer Health - On-Site Sewage Facilities (OSSFs) - Permitting, Inspections and Maintenance Agreements**

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Septic</td>
<td>$250.00</td>
<td>Permit fee for residential OSSF. Includes the state septic system charge of $10.00.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Commercial Septic</td>
<td>$450.00</td>
<td>Permit fee for commercial OSSF. Includes the state septic system charge of $10.00.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Maintenance Agreement fee for aerobic On-Site Sewage Facilities (OSSF)(One Time Fee)</td>
<td>$100.00</td>
<td>Additional fee to follow perpetual maintenance contracts for aerobic OSSFs.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Re-inspection - Residential</td>
<td>$125.00</td>
<td>Re-inspection fee for OSSF due to failed construction inspection. Charge is ½ of original permit fee.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Re-inspection - Commercial</td>
<td>$225.00</td>
<td>Re-inspection fee for OSSF due to failed construction inspection. Charge is ½ of original permit fee.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Septic Subdivision Review</td>
<td>$100.00</td>
<td>Fee to review subdivision plans as required by regulations.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
<tr>
<td>Ground Water Review</td>
<td>$100.00</td>
<td>Charge to review presence of groundwater in Bolivar/Galveston Area.</td>
<td>Fee allowed under Ch. 366 Health and Safety Code</td>
</tr>
</tbody>
</table>
# Environmental Health Services Fees

**Effective October 1, 2019**

## Consumer Health - Public and Semi-Public Pools, Spas and Interactive Water Features

<table>
<thead>
<tr>
<th>Service/Item</th>
<th>Current Fee</th>
<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pool Permit, Spas and Interactive Water Features</td>
<td>$135.00</td>
<td>Swimming pool permit fee.</td>
<td>Cost of a swimming pool permit under the Galveston County Rules on Swimming Pool Sanitation. Allowed under Ch.341.064 Health and Safety Code.</td>
</tr>
<tr>
<td>Pool Operator Class</td>
<td>$50.00</td>
<td>Training class to help people better operate public swimming pools.</td>
<td>Pool operator class provided by health district personnel to meet requirements of GCHD swimming pool regulation. Allowed under Ch. 341.064 of Health and Safety Code.</td>
</tr>
<tr>
<td>Pool Permit Late Fee</td>
<td>$50.00 if not paid by due date</td>
<td>Administrative late fee assessed for all pool permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
<tr>
<td>Pool Permit Late Fee</td>
<td>$100.00 if not paid 30 days after due date</td>
<td>Administrative late fee assessed for all pool permits not paid by the due date.</td>
<td>Fee approved by Board of Health</td>
</tr>
</tbody>
</table>

## Consumer Health - Miscellaneous Fees

<table>
<thead>
<tr>
<th>Service/Item</th>
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<th>Description</th>
<th>Fee Basis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexually Oriented Business (SOB) Permit</td>
<td>$1,000.00</td>
<td>Sexually oriented business permit fee.</td>
<td>Fee set by Commissioners Court for Sexually Oriented Businesses in unincorporated areas of the county under regulation passed by Commissioners Court.</td>
</tr>
<tr>
<td>AIDS Poster</td>
<td>$5.00</td>
<td>AIDS information poster.</td>
<td>Small poster required to be available at the health district for use in SOB’s under SOB regulation.</td>
</tr>
<tr>
<td>Rat Bait</td>
<td>$8.00</td>
<td>Rat bait to assist with community rodent control.</td>
<td>Four (4) pound packages of rat bait to assist consumers with rodent control issues on their property.</td>
</tr>
<tr>
<td>Duplicate Permit Fee</td>
<td>$20.00</td>
<td>Charge for copy of any permit issued under health district regulations.</td>
<td>Administrative fee</td>
</tr>
</tbody>
</table>
Environmental Health Services Fees

Effective October 1, 2019

Air and Water Pollution - Storm Water Permit

<table>
<thead>
<tr>
<th>Service/Item</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Storm Water Permit</td>
<td>$200.00</td>
<td>Storm water permit fee for construction activities</td>
<td>Storm Water MS4 Pollution Control order for Erosion and Sediment Control; Illicit Discharge and Post-Construction to meet requirement of GCHD storm water policy</td>
</tr>
</tbody>
</table>

Back to Agenda
United Board of Health
August 2019
Item #12

Introduction of Proposed Change to Animal Services Policy as Recommended by the Animal Services Advisory Committee (Step 1 of 3)
August 28, 2019

**Summary of recommended changes to the current Galveston County Animal Services Policy:**

1) Page 16:
   a. Dangerous Dog Declaration, Section B (1)
   b. Change the 15th day to the 30th day to remain consistent with State recommendation

B. Requirements for Owner or Custodian of Dangerous Dog (THSC Sections 822.042, 822.047)

(1) Not later than the 15th 30th day after a person learns that the person is the owner of a dangerous dog, the person shall:
POLICY/ORDER

A Galveston County United Board of Health Policy

GALVESTON COUNTY HEALTH DISTRICT ANIMAL SERVICES
LOCAL REGULATIONS AND RABIES CONTROL

WHEREAS, the Galveston County United Board of Health (Board) is a policy-making board of the Galveston County Health District, a public health district established under Chapter 121 of the Texas Health and Safety Code, and which encompasses fourteen (14) local governments: Galveston County, Bayou Vista, Clear Lake Shores, Dickinson, Friendswood (those portion of Friendswood located in Galveston County), Galveston (city), Hitchcock, Jamaica Beach, Kemah, La Marque, League City, Santa Fe, Texas City and Tiki Island; and

WHEREAS, Chapter 826 (Rabies Control Act of 1981) provides Health Authorities of public health districts with authority to enforce state law and rules and establish a local rabies control program; and

WHEREAS, the Galveston County Health District (District) provides animal services to the following participating county and cities through an Interlocal Agreement: Galveston County, Bayou Vista, Hitchcock, Kemah, La Marque, Texas City and Tiki Island; and

WHEREAS, it is the intention of this Board policy/order to be written pursuant to and in conformity with Chapters 481, 821, 822, 823, 826, and 828 of the Texas Health and Safety Code; Chapter 169 of Title 25 of the Texas Administrative Code; and Section 42.092 of the Texas Penal Code as amended. Said rules and law are incorporated herein by reference, provided that the exceptions and/or additions contained herein shall also apply.

NOW THEREFORE, BE IT ORDERED by the Galveston County United Board of Health of the Galveston County Health District as follows:
SCOPES OF SERVICES

Section 1 Authority to Enforce State Law and Rule

The Galveston County Health Authority is the person designated as the Local Rabies Control Authority for Galveston County pursuant to section 826.017 of the Health and Safety Code. The Animal Services Division shall act as the Health Authority’s designated animal control authority for purposes of Chapter 822 of the Texas Health and Safety Code. The Animal Services Division is authorized to enforce these Regulations and all laws applicable to the District’s local rabies control authority and animal control authority and is authorized to issue citations in the unincorporated area of Galveston County to enforce these regulations pursuant to Texas Health and Safety Code § 121.003(c).

These Regulations apply to all portions of the unincorporated Galveston County. These Regulations also apply to incorporated cities that adopt these Regulations and execute cooperative agreements with the District for their enforcement.

Section 2 Animal Services Advisory Committee

In accordance with its charge from the Galveston County United Board of Health, the Animal Services Advisory Committee shall assist the Animal Services Division by reviewing and recommending necessary changes in operations, budget matters, and compliance with all applicable laws, rules, regulations, and ordinances; this includes, but is not limited to, review of operating rules and policies and procedures for Animal Services. The Advisory Committee shall report to the Chief Executive Officer of the GCHD (CEO) or the CEO’s designee. The Advisory Committee consists of a minimum of eleven (11) and not more than eighteen (18) members as follows: One (1) member for each City who is Party hereto; One (1) member for the County who is a County Official; One (1) member for the County who is not required to be, but may be, a County Official (for a total of two (2) County representatives); One (1) member for the GCUBOH who is not required to be, but may be, a member of the GCUBOH or an employee of the GCHD; Two (2) members from animal welfare groups that are non-profit organizations (non-profit animal welfare group) as follows: a total of two (2) representatives with each of the two being from a different non-profit animal welfare group; One (1) veterinarian licensed by the Texas State Board of Veterinary Medical Examiners in accordance with the Veterinary Licensing Act to practice veterinary medicine in the State of Texas whose license is in an active status, whose license is not a provisional license, whose license is not a special license, and who practices veterinary medicine in the County of Galveston, Texas; and One (1) member whose duties include the daily operations of a shelter.

REGULATIONS FOR ANIMAL CONTROL

Section 3 Purpose

The purpose of the Animal Service Division is to control and eradicate the spread of rabies among the County’s animals, prevent rabies in the human population by controlling the animal population and establishing uniform rules for the control and eradication of rabies. In addition, Animal Services will promote responsible pet ownership through public education.
Section 4 Definitions

See Appendix 1

Section 5 Rabies Vaccination Required

Purpose: The purpose of this section is to require a licensed veterinarian to vaccinate every domestic dog, cat and domestic ferret located within the jurisdictional area outlined in the Galveston County Animal Services Interlocal Agreement at least every three (3) years depending on the type of vaccine. Once vaccinated, a certificate of vaccination will be issued and certain confidential information about the owner will not be divulged. This requirement conforms to Texas Health and Safety Code (THSC) Chapter 826 Rabies, Subchapter C. Rabies Vaccinations.

A. Rabies Vaccination Period (THSC Section 826.021)

The owner or custodian (excluding animal shelters) of each domestic dog, cat or ferret shall have the animal vaccinated against rabies by four months of age as required by Section 826.021 of the Texas Health & Safety Code. The animal must receive a booster within the twelve-month interval following initial vaccination. Every domestic dog or cat must be re-vaccinated against rabies at a minimum of at least once every three years with a rabies vaccine licensed by the United States Department of Agriculture. The vaccine must be administered according to label recommendations and by a licensed veterinarian.

B. Certificate of Rabies Vaccination (THSC Section 826.021)

Official rabies vaccination certificates shall be issued by the vaccinating veterinarian and, in accordance with Title 25, Chapter 169, Section 169.29(b) of the Texas Administrative Code, contain the following information:

(1) Owner’s name, address, and telephone number;

(2) Animal identification-species, sex (including neutered if applicable), approximate age (three months to 12 months, 12 months or older), size (pounds), predominant breed, and color;

(3) Vaccine used-product name, manufacturer, expiration date, and serial number;

(4) Date vaccinated;

(5) Date vaccination expires (revaccination due date);

(6) Rabies tag number if a tag is issued;
The licensed veterinarian’s signature or signature stamp and license number;

A copy of each rabies vaccination certificate issued shall be retained by the issuing veterinarian and readily retrievable for a period of not less than five years from the date of issuance.

C. Confidentiality of Certain Information in Rabies Vaccination Certificate; Penalty (THSC Section 826.0211)

(1) Information contained in a rabies vaccination certificate or in any record compiled from the information contained in one or more certificates that identifies or tends to identify an owner or an address, telephone number, or other personally identifying information of an owner of a vaccinated animal is confidential and not subject to disclosure under Public Information Act, Government Code Chapter 552, in accordance with Section 826.0211 of the Texas Health and Safety Code. The information contained in the certificate or record may not include the social security number or the driver’s license number of the owner of the vaccinated animal.

(2) In accordance with Section 826.0211 of the Texas Health & Safety Code, the information may be disclosed only to a governmental entity or a person that, under a contract with a governmental entity, provides animal control services or animal registration services for the governmental entity for purposes related to the protection of public health and safety. A governmental entity or person that receives the information, including a county or municipality that registers dogs and cats under this Subchapter D of Chapter 826 of the Texas Health & Safety Code, must maintain the confidentiality of the information, may not disclose the information under Public Information Act, Government Code Chapter 552, and may not use the information for a purpose that does not directly relate to the protection of public health and safety.

(3) A person commits an offense if the person distributes information that is confidential under this section. Such an offense is punishable as listed in Section 826.0211 and as it may be amended. As of 2018, such an offense is punishable, as provided by Subsection 826.0211(c), by: (1) a fine of not more than $1,000.00; (2) confinement in the county jail for not more than 180 days; or (3) both the fine and confinement.

Section 6 Registration of Dogs, Cats and Ferrets

Purpose: The purpose of this section is to outline requirements for owners of a dog, cat or ferret to register said animal with the District. This information will be retained in the files at the District and will assist officials with a count of animals located within the District’s jurisdictional boundaries, identify gender and track the number of animals that are spayed and neutered. In addition, this information will assist District personnel in public health disaster preparedness planning. All animals that are registered will be issued a license or a microchip that may assist owners in the recovery of a missing animal. This requirement conforms to Texas Health and Safety Code (THSC) Chapter 826 Rabies, Subchapter D. Registration and Restraint of Dogs and Cats and Texas Administrative Code, Title 25, Chapter 169, Vaccination Requirement.

A. Registration for Each Animal (THSC Section 826.031)
The owner or custodian of a dog, cat or ferret is hereby required to register and to obtain from the licensing authority for each dog, cat or ferret, a license tag or microchip that must be obtained within seven (7) days following its original rabies vaccination as required herein.

In accordance with Section 826.032 of the Texas Health & Safety Code, a person commits an offense if:

1. The owner or custodian fails or refuses to present for registration a dog or cat owned by the person; and
2. The animal is required to be registered by District Policy/Ordinance.
3. If a person fails to register the animal, District personnel will issue a citation to the owner. A reasonable amount of time will be given to the owner to complete the registration.
4. An offense under this section is a Class “C” misdemeanor.


A license tag or microchip for a dog, cat or ferret shall not be issued unless there is exhibited to the licensing authority a certificate from a licensed veterinarian showing that the animal to be licensed has been inoculated with an approved rabies vaccine, in accordance with the recommendations of the manufacturer.

C. Valid Period

The license as required in this section shall be valid for the lifetime of the animal as set by the Galveston County United Board of Health as long as the animal does not change ownership. If the animal changes ownership a new registration is required.

D. Animals Brought Into District

Any new permanent resident covered by this policy that owns a dog, cat or ferret brought into the District from other areas shall within seven (7) days of arrival obtain a license tag or microchip for each dog, cat or ferret and register each dog, cat or ferret as required herein. Said registration shall be valid for the time stated in this section of this rule.

E. License Tags or Microchip Required

Upon acceptance of the registration application, rabies vaccination certificate and payment of the registration fee, the District shall issue a microchip or durable tag, stamped with an identifying number. Failure to present the microchip information or license tag, as required herein, shall constitute a violation of this rule.

F. Identification Required

The owner of every dog, cat or ferret shall make sure that the animal is microchipped or that a license tag is attached to a collar or harness and said collar or harness with tags shall be worn by the dog, cat or ferret at all times when off the premises of the owner. Tags shall not be switched from one animal to another.
G. Registration Information

The District shall maintain a record of the identifying numbers of all microchips or tags issued and this record shall be available to the public; provided however that information in the record that identifies or tends to identify the owner or an address, telephone number, or other personally identifying information of the owner of the registered dog, cat or ferret is subject to disclosure in accordance with the Public Information Act and except as provided by Sections 826.0211 or 826.0311 of the Texas Health and Safety Code.

H. Registration Fees (THSC Section 826.031)

Any person required under this section of this rule to obtain registration for a dog, cat or ferret shall pay a registration fee set by the Galveston County United Board of Health. The registration fee will include microchipping of the animal unless the owner can provide proof that the animal has already been microchipped. The fee collected for the registration of a dog, cat or ferret shall be deposited in the Animal Services Division of the District’s General Fund and used only to help defray the cost of administering this subchapter in the District, including the costs of registration.

I. Registration Fees Prerequisite

All registration fees shall be paid to and collected by the District before any license tag or microchip will be issued.

J. Exceptions

The provision of this Section requiring the registration of dogs, cats and ferrets shall not apply to the following:

1. Dogs, cats and ferrets under the age of four (4) months if kept confined.
2. Dogs, cats and ferrets owned by persons who are non-residents of the District, traveling through the District or temporarily sojourning herein for a period not exceeding thirty (30) days. Upon request, the owner must show proof of current rabies vaccination certification.
3. Dogs, cats and ferrets brought to the District for not more than 10 days exclusively for the purpose of entering the same in any show or exhibition, breeding purposes or trial.
4. Dogs duly and properly trained (assistance animal) to aid or assist blind persons when such dogs are actually used by blind persons for the purpose of aiding or assisting such blind persons in going from place to place. These animals should be registered with the District without paying a fee.
5. Dogs duly and properly trained to aid or assist deaf persons when such dogs are actually used by deaf persons for the purpose of aiding or assisting such deaf persons in going from place to place. These animals should be registered with the District without paying a fee.
6. Dogs, cats and ferrets kept in qualified institutions, approved by the Health Authority, for...
teaching or research purpose.

(7) Dogs, cats and ferrets kept in veterinary hospitals or recognized animal shelters.

K. Registration; Penalty (THSC 826.032)

(1) A person commits an offense if:

(a) The person fails or refuses to register or present for registration a dog or cat owned by the person; and

(b) The animal is required to be registered under this policy adopted by the District’s Board of Health.

(2) An Animal Control Officer will investigate all cases of non-registration. If the Animal Control Officer determines that a violation exists, the Animal Control Officer will issue a warning or citation.

(3) An offense under this section is a Class C Misdemeanor.

(4) An Animal Control Officer will issue a citation to an owner of an animal that is not registered and each day that the animal is not registered is considered a new offense.

Section 7 Adoption and Sterilization

Purpose: The purpose of this section is to establish adoption standards of the District that reasonably promote the responsible management of dogs and cats by requiring spaying and neutering prior to release or in certain circumstances require the use of a signed sterilization agreement for every animal adopted. Every animal adopted from the Animal Resource Center needing to be spayed or neutered shall be microchipped or tattooed in accordance with state law. These identification methods can be useful to animal owners in the event that their animal may become lost. Registered rescue organizations that pull animals from the Galveston County Animal Resource Center shall submit a completed and signed sterilization agreement for every animal.

A. Requirements for Adoption (THSC Sections 828.002, 828.003, and 828.011)

The District shall not release a dog or cat for adoption unless the animal has been spayed or neutered or under special circumstances the release is made to a new owner who signs an agreement to have the animal sterilized. The sterilization agreement must at minimum, comply with Section 828.003 of the Texas Health and Safety Code. The Animal Services Director or designee must approve these special circumstances. The Animal Services Director or designee will develop procedures to cover sterilization requirements, nonsurgical sterilization, confirmation of sterilization, letters concerning animal’s death, letters concerning lost or stolen animals, notice of failure to receive a letter, and reclamation of owned animals.

B. Exemptions (THSC Section 828.013)
This Section 7 does not apply to a dog or cat that is claimed from the District by a person who already owns the animal; to a releasing agency located in a municipality that has in effect an ordinance providing standards for dog and cat sterilization that exceed the requirements in this policy; or to an institution of higher education that purchases or otherwise procures a dog or cat for the purpose of biomedical research, testing, or teaching.

C. Microchipping or Tattooing

Any animal adopted under this policy shall be sterilized and must be identified by a microchip and/or a tattoo indicating that it has been sterilized. The Animal Services Director or designee will develop procedures that will fully explain the standards for microchipping and tattooing along with the penalties associated with not complying with this requirement.

D. Refund Policy

There are no refunds.

Section 8 Restraint, Impoundment and Disposition of Dogs and Cats to Prevent a Public Nuisance

Purpose: The purpose of this section is to make certain that every owner of an animal exercises proper care and control to prevent their animal from running at large or becoming a public nuisance. This section also empowers Animal Control Officers to capture any and all animals deemed running at large or creating a public nuisance. Once captured, the Animal Control Officer impounds the animal and documents all known information. For unhealthy stray animals, the Animal Services Director or designee at his or her discretion may humanely euthanize the dog.

A. Restraint (THSC Section 826.033)

(1) Every owner shall exercise proper care and control of his or her animal by keeping the animal restrained and not allowing the animal to become a stray while in the jurisdiction of the District and to prevent them from becoming a public nuisance.

(2) Each of the following conditions, situations or occurrences are hereby declared to be a public nuisance and constitutes failure of the owner to exercise proper care and control of his animal and/or the premises where said animal or animals are or have been kept:

(a) Every stray animal is a public nuisance. The District receives and responds to animal public nuisances that involve dogs and cats. Local municipalities and/or the county’s sheriff office handle livestock that are public nuisances. District personnel respond to wildlife nuisances and may request assistance from other governmental agencies and/or a certified wildlife rehabilitator.

(b) Any animal that turns over garbage containers or scatters garbage or which otherwise damages private or public property.

(c) Any dog, livestock or fowl at large or free-roaming off of the private property owned or
controlled by the owner of said dog, livestock or fowl.

(d) Any animal which barks, whines, howls or makes other sounds or noises in an excessive, continuous or untimely fashion.

(e) Any building, room, cage, kennel, yard, run or any other place or facility where animals are kept or harbored which is not maintained in a clean and sanitary condition so as to prevent obnoxious odors, the attraction, breeding or potential breeding of flies, the attraction, harboring or breeding of rodents or potential breeding of rodents or the creation of any other public health nuisances.

B. Impoundment

(1) Animal Control has the authority to impound the following:

(a) All stray animals, however in extenuating circumstances that involve the impoundment of other animals the Animal Services Director or designee shall approve.

(b) Any animal that has bitten or scratched a person; and

(c) Any animal that has been exposed to rabies or potentially exposed.

(2) All animals seized and confined under this section should be impounded in an impoundment facility designated by Animal Control and shall supply the animal with sufficient wholesome food and water during its confinement. All animals seized will be held in impoundment for a minimum of three (3) business days open to the public, with the exception of litters as described below:

(a) All impounded litters (2 or more in a litter) will not be subject to the 3 business day stray hold if they are under 4 months of age. These animals can be available for adoption, rescue or foster on day 1, if approved by the Animal Services Director or designee.

(3) Any person may take and deliver to Animal Control any stray dog or cat to impound.

(4) Any person may surrender an owned animal to Animal Control if the following criteria are met:

(a) The associated fee is paid in full; and

(b) The Animal Resource Center has available space and resources to properly care for the animal.

C. Impoundment of Owned Animals - Unrestrained (Running At Large)

When animals are unrestrained or stray and the Animal Control Officer knows their ownership, the Officer may secure/impound the animal and issue a citation to the owner of the animal to appear in a court to answer charges of violation of this Policy/Order.
D. Unrestrained (At Large) - Riding in Vehicle

Unrestrained animals in the back of pickup trucks, which are not covered with a camper cover or other such device, shall be considered at large. When animals are unrestrained, the Animal Control Officer can secure the animal and issue a citation to the owner of the animal to appear in a court to answer charges of a violation of this Policy/Order; or impound the animal and issue a citation to the owner of the animal to appear in a court to answer charges of violation of these Policy/Order. Animals in vehicles shall be restrained in a manner, which will not cause injury and will prevent the animal from reaching the outside of the vehicle.

E. Unrestrained (At Large) – on Private Property

Any dog found running at large upon any private property other than that of the owners may be taken up by any person and delivered to the Galveston County Animal Resource Center without fee or charge, and the District shall thereupon hold and dispose of such animal as though such animal had been found running at large and impounded by Animal Control. All dogs impounded under this section shall be held for a minimum of three (3) business days open to the public. At the end of these three (3) days the District will determine its disposition.

F. Unlawful Restraint of a Dog - Anti-Tethering Law (THSC Section 821.077)

An owner may not leave a dog outside and unattended by use of a restraint that unreasonably limits the dog’s movement:

1. Between the hours of 10 pm and 6 am;
2. Within 500 feet of the premises of a school; or
3. In the case of extreme weather conditions, including conditions in which:
   a. The actual or effective outdoor temperature is below 32 degrees Fahrenheit;
   b. A heat advisory has been issued by a local or state authority or jurisdiction; or
   c. A hurricane, tropical storm, or tornado warning has been issued for the jurisdiction by the National Weather Service.

In this section, a restraint unreasonably limits a dog’s movement if the restraint:

1. Uses a collar that is pinch-type, prong-type, or choke-type or that is not properly fitted to the dog;
2. Is a length shorter than the greater of:
   a. Five times the length of the dog, as measured from the tip of the dog’s nose to the base of the dog’s tail; or
   b. 10 feet;
(3) Is in an unsafe condition; or
(4) Causes injury to the dog.

G. Anti-Tethering Law: PENALTY (THSC Section 821.079)

The owner of any dog shall comply with all requirements found in the Chapter 821, Texas Health and Safety Code, Subchapter D Unlawful Restraint of dog, in addition to the ones found below.

(1) A person commits an offense if the person knowingly violates Subchapter D of the Texas Health and Safety Code.

(2) A Peace Officer or Animal Control Officer who has probable cause to believe that an owner is violating this subchapter shall provide the owner with a written statement of that fact. The statement must be signed by the Officer and plainly state the date on which and the time at which the statement is provided to the owner.

(3) A person commits an offense if the person is provided a statement described by Subsection (2) and fails to comply with this subchapter within 24 hours of the time the owner is provided the statement. An offense under this subsection is a Class C misdemeanor.

(4) A person commits an offense if the person violates this subchapter and previously has been convicted of an offense under this subchapter. An offense under this subsection is a Class B misdemeanor.

(5) If a person fails to comply with this subchapter with respect to more than one dog, the person's conduct with respect to each dog constitutes a separate offense.

(6) If conduct constituting an offense under this section also constitutes an offense under any other law, the actor may be prosecuted under this section, the other law, or both.

Section 9 Reporting and Quarantine of Rabies Suspect

Purpose: The purpose of this section is to insure uniform and consistent reporting, investigating and quarantining of any animal that the Health Authority or his or her designee believes to be rabid, may have been exposed to rabies, or may have exposed a person to rabies.

A. Reporting (THSC Section 826.041)

A person who knows of an animal bite or scratch to an individual that the person could reasonably foresee as capable of transmitting rabies, or who knows of an animal that the person suspects is rabid, shall report the incident or animal to the local rabies control authority of the county or municipality in which the person lives, in which the animal is located, or in which the exposure occurs. The report shall include all information necessary to assist in the investigation and in accordance with Section 826.041 of the Texas Health and Safety Code, the name and address of the victim and the animal's owner, if known, and any other information that may be helpful in locating the victim or animal.
B. Quarantine of Animals (THSC Section 826.042)

(1) Whenever and wherever in this Policy/Order an animal is required to be confined in quarantine, the time, place and method of confinement shall be at the discretion of the Health Authority or designee. Animals required to be confined shall be quarantined at the Galveston County Animal Resource Center, a veterinary clinic or a state approved quarantine facility. No home quarantine is allowed.

(2) The Health Authority or designee may order the quarantine or testing in accordance with this policy for any animal that the Health Authority or designee has probable cause to believe is rabid, may have been exposed to rabies, or may have exposed a person to rabies. Testing requires euthanasia of the animal, then removal of the head with laboratory analysis at a state approved laboratory.

(3) An owner shall submit to the Health Authority or designee for quarantine an animal that is reported to be rabid or to have exposed an individual to rabies or the owner knows or suspects is rabid or has exposed an individual to rabies, as soon as possible, but not later than twenty-four (24) hours from the time of the reported incident.

(4) The quarantine period shall be at least ten (10) days or 240 hours from time of bite in a place of confinement designated or approved by the local rabies control authority and under such conditions and in such a manner as may be prescribed by the Health Authority or designee.

(5) At the time the owner submits for quarantine an animal described by subsection (2) above, the Health Authority or designee shall:

   (a) Provide written notification to the animal’s owner of the date the animal enters quarantine and the date the animal will be released from quarantine;

   (b) Obtain an retain with the animal’s records a written statement signed by the animal’s owner and a supervisor employed by the veterinarian or local rabies control authority acknowledging that the information required by Subdivision (a) has been provided to the animal’s owner; and

   (c) Provide the animal’s owner a copy of the signed written statement obtained under subdivision (b).

(6) The Health Authority or designee shall identify each animal quarantined under this section with a placard or other marking on the animal’s kennel that indicates the animal is quarantined under this section.

C. Release or Disposition of Quarantined Animal (THSC Section 826.043)

(1) If the Health Authority or designee determines that a quarantined animal does not show the clinical signs of rabies, the Health Authority or designee shall release the animal to its owner when the quarantine period ends if:
(a) The owner has an unexpired rabies vaccination certificate for the animal; or
(b) The animal is vaccinated against rabies by a licensed veterinarian at the owner's expense.

(2) If the Health Authority or designee determines that a quarantined animal shows the clinical signs of rabies, the Health Authority or designee shall humanely destroy the animal. If an animal dies or is destroyed while in quarantine, the Health Authority or designee shall remove the head or brain of the animal and submit it to a state approved laboratory for testing.

(3) The owner of an animal that is quarantined under this chapter shall pay to the District the reasonable costs of the quarantine and disposition of the animal. The Health Authority or designee may bring suit to collect those costs.

(4) Except as provided by Subsection (5), the Health Authority or designee may sell the animal and retain the proceeds, or keep, grant, or destroy an animal if the owner does not take possession of the animal before the fourth day following the final day of the quarantine period.

(5) The Health Authority or designee may not destroy an animal following the final day of the quarantine period unless the Health Authority or designee has notified the animal’s owner, if available, of the animal’s scheduled destruction.

(6) It shall be a violation of this Policy/Order for the owner or any other person to remove any animal that is required to be quarantined or euthanized or which is otherwise in violation of this Policy/Order from the jurisdiction of the District without written permission from the Health Authority or designee and release or movement from the place of approved confinement shall only be in accordance with this section.

(7) No animal shall be released or moved from the place of quarantine, except by the Health Authority or designee until after the ten (10) day quarantine period and then only after inspection of the animal has been made and its release approved by the Health Authority or designee.

D. Quarantine: Criminal Penalty (THSC Section 826.044)

(1) A person commits an offense if the person fails or refuses to quarantine or present for quarantine or testing an animal that: is required to be placed in quarantine or presented for testing under this section (Section 9); and

(2) An offense under this section is a Class C misdemeanor.

E. Exemptions (THSC Section 826.048)

Police service animals are exempt from the quarantine requirements of this section if the animal meets the standards in Section 826.048 of the Texas Health and Safety Code.

F. Fees and Cost
Transportation, capture, laboratory costs, veterinarian impound fees, quarantine costs, euthanasia, body disposal, vaccination costs, and any and all other fees, costs, charges and duties for quarantine and disposition of the animal shall be the direct responsibility of the animal owner or custodian. Failure of the owner or custodian to pay such costs and fees shall constitute a violation of this Policy/Order.

Section 10 Cruelty to Animals and Dog Fighting

Purpose: The purpose of this section is to define the roles and responsibilities of the District in the investigation of cruelty to animals. The District may provide for the initial investigation into the claims of animal cruelty, assess the health and welfare of the animal, inform the owner of the suspected cruelty, advise owner of proper care and management of animals and provide for the necessary enforcement when applicable. If an animal must be seized as part of cruelty investigation, the District will assist law enforcement in the removal of animals during a law enforcement directed seizure, assist in the transportation of the animals to a licensed veterinarian for an evaluation of the animal’s health and welfare, and upon request, house and provide care for all animals obtained during a seizure. All warrants directing the seizure of animals shall be served by a certified Peace Officer. The District will work the Galveston County District Attorney’s Office to seek restitution for the expenses associated with the seizure and the care of the animals. These sections conform to Penal Code Title 9. Title 9 also, in addition to other offenses, makes cruelty to livestock animals (42.09), attacks on assistance animals (42.091), dog fighting (42.10), and cock fighting (42.105) offenses in accordance with its provisions...

A. Cruelty to Nonlivestock Animals (Texas Penal Code § 42.092(b))

A person commits an offense if the person intentionally, knowingly, or recklessly:

(1) Tortures an animal or in a cruel manner kills or causes serious bodily injury to an animal;
(2) Without the owner’s effective consent, kills, administers poison to, or causes serious bodily injury to an animal;
(3) Fails unreasonably to provide necessary food, water, care, or shelter for an animal in the person's custody;
(4) Abandons unreasonably an animal in the person's custody;
(5) Transports or confines an animal in a cruel manner;
(6) Without the owner's effective consent, causes bodily injury to an animal;
(7) Causes one animal to fight with another, if either animal is a dog;
(8) Uses a live animal as a lure in dog race training or in dog coursing on a racetrack; or
(9) Seriously overworks an animal.

B. Degree of Offense (Texas Penal Code § 42.092(c),(c-1),(c-2))
(1) An offense under subsection 10(A)(3), (4), (5), (6), or (9) is a Class A misdemeanor, except that the offense is a state jail felony if the person has previously been convicted two times under this section, two times under Section 42.09, or one time under this section and one time under Section 42.09.

(2) An offense under subsection 10(A) (1) or (2) is a felony of the third degree, except that the offense is a felony of the second degree if the person has previously been convicted under subsection(1), (2), (7), or (8), or under Section 42.09.

(3) An offense under subsection 10(A)(7) or (8) is a state jail felony, except that the offense is a felony of the third degree if the person has previously been convicted under this section or under Section 42.09.

C. Exceptions (Texas Penal Code § 42.092(f))

It is an exception to the application of this section that the conduct engaged in by the person is a generally accepted and otherwise lawful:

(1) Form of conduct occurring solely for the purpose of or in support of:

   (a) Fishing, hunting, or trapping; or

   (b) Wildlife management, wildlife or depredation control, or shooting preserve practices as regulated by state and federal law; or

(2) Animal husbandry or agriculture practice involving livestock animals.

Section 11  Seizure of Animal(s)

Purpose: The District’s Role in the seizure of dogs causing death or serious bodily injury to a person is to assist law enforcement agencies and fulfill the orders of any court with jurisdictional authority to seize a dog. The District shall seize the dog and shall provide impoundment of the dog in secure and humane conditions until time that the court orders the disposition of the dog. Trained personnel will provide for the humane euthanasia of the dog at the order of the court.

Section 12  Dangerous Dogs

Purpose: The purpose of this section is to assess dog behavior and determine if this behavior is classified as dangerous. The Animal Services Director or designee reviews all dangerous dog determination cases. Once identified as a dangerous dog, the owner is required to follow the requirements for the owner of a dangerous dog as outlined in this section. An owner of a dangerous dog can appeal the decision of the Animal Control Officer to the Animal Services Director or designee to the Health Authority. The decision of the Health Authority is final. The owner may appeal this final decision to the local court system.

A. Dangerous Dog Behavior (THSC Section 822.041)
Dangerous dog behavior means a dog that:

(1) makes an unprovoked attack on a person that causes bodily injury and occurs in a place other than an enclosure in which the dog was being kept and that was reasonably certain to prevent the dog from leaving the enclosure on its own; or

(2) commits unprovoked acts in a place other than an enclosure in which the dog was being kept and that was reasonably certain to prevent the dog from leaving the enclosure on its own and those acts cause a person to reasonably believe that the dog will attack and cause bodily injury to that person.

B. Requirements for Owner or Custodian of Dangerous Dog (THSC Sections 822.042, 822.047)

(1) Not later than the 15th 30th day after a person learns that the person is the owner of a dangerous dog, the person shall:

(a) Annually register the dangerous dog with the District; and

(b) Restrain the dangerous dog at all times either on a leash in the immediate control of a person or in a secure enclosure; and

(c) Obtain liability insurance coverage or show financial responsibility in an amount of at least $100,000 to cover damages resulting from an attack by the dangerous dog causing bodily injury to a person and provide proof of the required liability insurance coverage that identifies in the policy that the dangerous dog is covered or financial responsibility to the District. The insurance shall be for a twelve month period, shall not be cancelled unless the animal is no longer kept by the owner, and must be renewed or obtained for as long as the person has custody or ownership of the dangerous dog; and

(d) The dangerous dog when taken outside of the enclosure must be securely muzzled in a manner that will not cause injury to the dangerous dog nor interfere with its vision or respiration but shall prevent it from biting any person or animal; and the dangerous dog must be restrained by high visibility collar marked with the words “dangerous dog” on the collar and must be connected to a substantial chain or cable leash having a minimum tensile strength of 1000 pounds and not to exceed 6 feet in length; and

(e) The owner shall post a sign on his or her premises warning that there is a dangerous dog on the property. This sign shall be visible and capable of being read from the public street or highway; and

(f) The dangerous dog shall be spayed or neutered and microchipped; and

(g) The owner shall notify the District as soon as possible, but under any circumstance not later than twenty-four (24) hours, if a dangerous dog is loose, stolen, unconfined in a secured enclosure, has attacked another animal, has attacked a person, or has died; and

(h) The District may at its discretion allow or disallow the relocation of a dangerous dog. Approval to relocate a dangerous dog shall be in writing. If the owner or custodian of a dangerous dog obtains approval to relocate, the owner or custodian shall provide the District
with the name, address and telephone number of the new location of the new secure enclosure. The new secure enclosure shall comply with all of the requirements of owners or custodians of dangerous dogs immediately. If the relocation is outside the jurisdictional boundaries of the District, the Animal Services Division shall notify the appropriate animal control authority in that jurisdiction.

(2) The owner of a dangerous dog who does not comply with this section by the 15th day after the owner learns that the dog is a dangerous dog, the owner shall deliver the dog to the Galveston County Animal Resource Center.

(3) If, on application of any person, the District, after notice and hearing as provided by this section, that the owner of a dangerous dog has failed to comply with this section, the District shall file in court for an order to seize the dog. The warrant will authorize the seizure. The Animal Services Division shall seize the dog or order its seizure and shall provide for the impoundment of the dog in secure and humane conditions.

(4) The owner shall pay any and all cost or fee assessed by the District related to the seizure, acceptance, impoundment, or destruction of the dog. The fees are set by the Galveston County United Board of Health.

(5) The Health Authority or designee shall order the Animal Services Division to humanely destroy the dog if the owner has not complied with this section and the time for appeal has expired. The Health Authority or designee shall order the Animal Services Division to return the dog to the owner if the owner complies with this section and the time for appeal has expired and following the end of the quarantine period.

(6) The Health Authority or designee may order the humane destruction of a dog if the owner of the dog has not been located before the 15th day after the seizure and impoundment of the dog.

(7) For purposes of this section, a person learns that the person is the owner of a dangerous dog when:

   (a) The owner knows of an attack as described in the definition of dangerous dog behavior; or
   
   (b) The owner receives notice that a justice court, county court, or municipal court has found that the dog is a dangerous dog under this section; or
   
   (c) The owner or custodian is informed by the Animal Control Authority that the dog is a dangerous dog under this section.

B. Determination that Dog is Dangerous and Appeal Process (THSC Section 822.0421)

(1) If a person reports an incident described in dangerous dog behavior, the Animal Services Division shall investigate the incident. An Animal Control Officer will conduct a thorough investigation of the incident and will recommend to the Animal Services Director or designee if a dangerous dog declaration is appropriate. If, after receiving the recommendation of the Animal Control Officer and the sworn statements of any witnesses, the Animal Services Director or designee will make the determination that the dog is dangerous. The Animal Services Director or designee shall notify the
owner of that fact by certified letter or by hand delivery of that letter.

(2) An owner, not later than the 5th day after the date the owner is notified that a dog owned by the owner is a dangerous dog may appeal the determination of the Animal Services Director or designee. An owner of the dangerous dog may appeal the decision, to the Health Authority.

(3) Notwithstanding subsection (2) above, an owner, not later than the 15th day after the date the owner is notified that a dog owned by the owner is a dangerous dog, may appeal the determination of the Animal Services Director or designee to a justice, county, or municipal court of competent jurisdiction. To file this appeal, the owner must:

(a) File a notice of appeal of the Animal Services Director or designee’s determination with the court;

(b) Attach a copy of the determination from the Animal Services Director or designee; and

(c) Serve a copy of the notice of appeal on the Animal Services Director by mailing the notice through the United States Postal Service by certified mail, return receipt requested, with proper postage affixed and properly addressed.

(4) An owner may appeal the decision of the justice or municipal court in the manner described by Section 822.0424 of the Texas Health and Safety Code.

(5) The owner of the dangerous dog shall comply with the requirements for owners of dangerous dogs during the appeal process.

C. Registration of Dangerous Dog (THSC Section 822.043)

Annually register the dangerous dog with the Animal Services Division in compliance with the Texas Health and Safety Code if the owner:

(1) Presents proof of:

(a) Liability insurance or financial responsibility, as required by this section.

(b) Current rabies vaccination of the dangerous dog;

(c) The secure enclosure in which the dangerous dog will be kept; and

(d) Pays an annual registration fee as approved by the Galveston County United Board of Health.

(2) The Animal Services Division shall provide to the owner registering a dangerous dog a registration tag. The owner must place the tag on the dog's collar.

(3) If an owner of a registered dangerous dog sells or moves the dog to a new address, the owner, not later than the 14th day after the date of the sale or move, shall notify the Animal Services Division for the area in which the new address is located. On presentation by the current owner of the
dangerous dog’s prior registration tag and payment of a fee as approved by the Galveston County United Board of Health, the Animal Services Division shall issue a new registration tag to be placed on the dangerous dog’s collar.

(4) An owner of a registered dangerous dog shall notify the Animal Services Division of any attacks the dangerous dog makes on people.

D. Dangerous Dog at Large

Any dangerous dog found at large after the owner thereof has previous knowledge or notice that such dog is dangerous may be tranquilized, captured, impounded and humanely euthanized with or without notifying the owner.

Section 13 Keeping of Dangerous Wild Animals Prohibited with Exceptions

Purpose: The purpose of this section is to stop any additional importation of dangerous wild animals into Galveston County. Current registered dangerous wild animals may remain within the county until time that the dangerous wild animal is moved to another area outside of Galveston County or the animal becomes deceased. A person that owns, harbors or has custody of a registered dangerous wild animal shall comply with all of the registration requirements of the District and hold a valid certificate of registration as issued by the District.

A. Applicability (THSC Section 822.102)

(1) The District shall not allow for the importation of any dangerous wild animal into the jurisdictional area served by this Policy/Order.

(2) This subchapter does not apply to:

(a) Any current registered dangerous wild animal located in Galveston County.

(b) A District, county, municipality, or agency of the state or an agency of the United States or an agent or official of a county, municipality, or agency acting in an official capacity;

(c) A research facility, as that term is defined by Section 2(e), Animal Welfare Act (7 U.S.C. Section 2132), and its subsequent amendments, that is licensed by the secretary of agriculture of the United States under that Act

(d) An organization that is an accredited member of the Association of Zoos and Aquariums;

(e) An injured, infirm, orphaned, or abandoned dangerous wild animal while being transported for care or treatment;

(f) An injured, infirm, orphaned, or abandoned dangerous wild animal while being rehabilitated, treated, or cared for by a licensed veterinarian, an incorporated humane society or animal shelter, or a person who holds a rehabilitation permit issued under Subchapter C, Chapter 43, Parks and Wildlife Code;
(g) A dangerous wild animal owned by and in the custody and control of a transient circus company that is not based in this state if:

(1) The animal is used as an integral part of the circus performances; and
(2) The animal is kept within this state only during the time the circus is performing in this state or for a period not to exceed 30 days while the circus is performing outside the United States;

(h) A dangerous wild animal while in the temporary custody or control of a television or motion picture production company during the filming of a television or motion picture production in this state;

(i) A dangerous wild animal owned by and in the possession, custody, or control of a college or university solely as a mascot for the college or university;

(j) A dangerous wild animal while being transported in interstate commerce through the state in compliance with the Animal Welfare Act (7 U.S.C. Section 2131 et seq.) and its subsequent amendments and the regulations adopted under that Act;

(k) A nonhuman primate owned by and in the control and custody of a person whose only business is supplying nonhuman primates directly and exclusively to biomedical research facilities and who holds a Class "A" or Class "B" dealer's license issued by the secretary of agriculture of the United States under the Animal Welfare Act (7 U.S.C. Section 2131 et seq.) and its subsequent amendments;

(l) A dangerous wild animal that is:

(1) Owned by or in the possession, control, or custody of a person who is a participant in a species survival plan of the Association of Zoos and Aquariums for that species; and
(2) An integral part of that species survival plan.

Section 14 Animal Shelters (THSC Chapter 823)

The Galveston County Animal Resource Center is operated in compliance with Texas Health and Safety Code Chapter 823. The Animal Resource Center serves the current members to the Galveston County Animal Services Interlocal Agreement. All Animal Resource Center personnel are trained as prescribed by the Texas Department of State Health Services standards for the humane treatment and care of animals, animal disease, and the transportation of animals. In addition, the Galveston County Animal Services Advisory Committee, described in Section 2 of this Policy/Order, serves the Galveston County Animal Resource Center.

The Animal Resource Center is designated the owner of every animal immediately upon impoundment, intake or surrender of the animal to the Animal Resource Center subject to procedures, other sections of this policy, and in accordance with the Texas Occupations Code 801.004. “Owner” in this section
includes the temporary assumption of ownership for the purposes of, but not limited to, administering core intake vaccinations and performing euthanasia as directed by procedures. After three (3) business days open to the public, animals that are not claimed and redeemed by the original owner or custodian may be adopted, rescued, or humanely euthanized.

Section 15  Euthanasia of Animals (THSC Chapter 821, Subchapter C)

The District administers sodium pentobarbital to euthanize animals in the custody of the Animal Resource Center in accordance with the requirements and procedures established pursuant to Subchapter C of Chapter 821 of the Texas Health and Safety Code. An approved sponsor and curriculum in the proper methods and techniques for euthanizing animals trains all Animal Services Division employees.

Section 16  Disposal of Carcasses

The owner of an animal that has control of the animal before or at the time of the animal’s death shall be responsible for the proper disposal of the animal carcass and shall assume all costs associated with this disposal. If the owner of a dead animal cannot be identified, the property owner or the person having control of the property containing the carcass shall be responsible for the disposal of the carcass and shall also assume all of the costs associated with the proper disposal.

Section 17  Releasing or Abandonment of Animals

A. Violation to Release or Abandon an Animal

It shall be a violation of this Policy/Order for any person to release or abandon any animal, dog, cat or other animal whatsoever on any property, whether public or private, within the District. An animal shall be considered abandoned if the owner has not provided care, including food, water or shelter, for three (3) or more consecutive days. Notwithstanding the foregoing for construing abandonment, a person commits an offense if the person fails unreasonably to provide necessary food, water, care, or shelter for an animal in the person’s custody as provided under Section 42.092 of the Texas Health & Safety Code, and the criminal offense does not require a three (3) day or other day minimum.

B. Person Having Knowledge of Releasing and Abandoning

Any person having knowledge of an animal which has been or is believed to have been released or abandoned shall so notify the Animal Services Division and shall give all pertinent information including description and location of the animal and the name, address, car license number, or any other information or description of the person who dumped, released or abandoned the animal, if known.

C. Keeping, Harboring or Feeding Strays

Any person who keeps, harbors, feeds, shelters or otherwise allows any stray animal or any animal, which has been released or abandoned, to remain on the person’s property for three (3) or more days without notifying the District, shall hereby be deemed the owner of said animal.
Section 18 Wildlife

A. Keeping of Wildlife

No person may collect, hold, possess, display, transport, release, or propagate protected wildlife, as defined under the laws of this state or federal law, for the purposes of this subchapter without a permit issued under the Parks and Wildlife Code, Chapter 43 Special Licenses and Permits.

Section 19 Right to Enter Property

A. Right to Enter

(1) Animal Control Officers are authorized to enter any unsecured or unfenced lot, tract or parcel of land for the purpose of capturing any animal running at large.

(2) Nothing in this Policy/Order shall be construed as authority for Animal Control Officers, employees or their agents to enter buildings unless:

(a) The owner or other person with control over the premises consents to entry,

(b) A valid warrant is obtained, or

(c) Exigent circumstances exist such that there is necessity to act immediately to protect or preserve life or to prevent serious injury to a person or an animal.

Section 20 Interference with Animal Control Officer

No person may interfere with, hinder or molest any Animal Control Officer, or other party designated by Animal Control, in the performance of any duty delegated in this Policy/Order, nor shall any person seek to release any animal impounded under the provisions of this Policy/Order except as herein provided.

Section 21 Duties of Health Authority (THSC Section 121.024)

(1) A health authority is a state officer when performing duties prescribed by state law.

(2) A health authority shall perform each duty that is:

(a) Necessary to implement and enforce a law to protect the public health; or

(b) Prescribed by the Texas Department of State Health Services (“DSHS”).

(3) The duties of a health authority include:
(a) Establishing, maintaining, and enforcing quarantine in the health authority's jurisdiction;

(b) Aiding the DSHS in relation to local quarantine, inspection, disease prevention and suppression, birth and death statistics, and general sanitation in the health authority's jurisdiction;

(c) Reporting the presence of contagious, infectious, and dangerous epidemic diseases in the health authority's jurisdiction to the DSHS in the manner and at the times prescribed by the DSHS;

(d) Reporting to the DSHS on any subject on which it is proper for the DSHS to direct that a report be made; and

(e) Aiding the DSHS in the enforcement of the following in the health authority's jurisdiction:

   (A) Proper rules, requirements, and ordinances;

   (B) Sanitation laws;

   (C) Quarantine rules; and

   (D) Vital statistics collections.

Section 22 Health Authority may Promulgate Rules

The Health Authority shall have the power, with the approval of the Board, to prescribe and promulgate such policy/orders, not inconsistent with any law of the State, as may be deemed necessary to protect the health and safety of the people and to effectively perform the duties imposed herein.

Section 23 Enforcement

The Health Authority of the Galveston County District or delegated representative shall enforce the provisions of this policy/order. It shall be a violation of this rule to interfere with the Health Authority or his delegated officer or any other delegated representative of the Health Authority in the performance of their duties.

Section 24 Issuance of Citations

In addition to or in lieu of impounding an animal which is in violation of or has violated any section or subsection of this rule or in addition to or in lieu of suspension or revocation of a license or permit, the Animal Services Division may issue to the owner of such animal or holder of such license or permit a penalty which shall be stated on the notice, which may, at the discretion of the animal owner or holder of the permit or license, be paid to the agency designated by the Animal Services Division within the time specified on the notice in full satisfaction of the assessed penalty. In the event that such penalty is not paid within the time period prescribed, a complaint will be filed in a court of law and upon conviction of a
violation of this rule and the owner shall be punished as provided in this rule.

Section 25 Liability

Any suit brought against any officer or employee of the District because of some act performed by the officer or employee in the enforcement of any provision of this rule shall be defended by legal counsel of the District’s liability insurance until the final termination of the proceedings.

Section 26 Invalidity

In the event any section, clause, sentence or paragraph or any part of this rule shall for any reason be adjudged by any court of competent jurisdiction to be invalid, such invalidity shall not affect, impair, or invalidate the remainder of this rule.

Section 27 Rules in Conflict Repealed

All ordinances, rules or parts of ordinances or rules in conflict herewith are, to the extent of such conflict, hereby repealed.

Section 28 Effective Date

This rule shall be in full force and effect from and after its passage and its publication as provided by law. Publication shall be by caption only in a newspaper of general circulation within the County of Galveston.
Passed and approved on second reading the 21st day of October, 1981, and amended on second reading on this 23rd day of February, 1983, and amended on second reading on this 27th day of July, 1988 and amended on second reading on the 13th day of December, 1995, and amended on second reading this 26th day of June, 2002, and amended on second reading this 30th day of July, 2003. Passed and approved on second reading on this 26th day of September 2007. Passed and approved on second reading on this 25th day of March 2009. Passed and approved on second reading on this 25th day of April 2012. Passed and approved on second reading on this 25th day of February 2014. Passed and approved on this 29th day of April 2015. Passed and approved on second reading on this 26th day of July 2017. Passed and approved on second reading on this ___ day of ____ 2019.

IT IS SO ORDERED

PASSED AND APPROVED the ____ day of ___________ 2019.

APPROVED

______________________________
Chairman,  
Galveston County United Board of Health

Signed before me this ____ day of ____________, 2019  
Notary Public for the State of Texas
Appendix 1 – Definitions

The word “Abandon” shall mean the abandoning of an animal in the person’s custody without reasonable arrangements for assumption of custody to another person.

The word “Animal” shall mean a non-human warm or cold-blooded animal, every living dumb creature, or any mammal, domesticated or wild.

The words “Animal Services Division” shall mean the Animal Services Division of the Galveston County Health District.

The words “Animal Shelter” shall mean a facility that keeps or legally impounds stray, homeless, abandoned, or unwanted animals.

The words “Animal Control Officer” shall mean the person or persons employed by the Galveston County Health District, Animal Services Division.

The words “Animal Shelter” shall mean any facility that keeps or legally impounds stray, homeless, abandoned, or unwanted animals.

The words “Assistance Animal” shall meaning assigned by Section 121.002, Human Resources Code.

The word “Bite” shall mean any abrasion, scratch, puncture, tear, or piercing of the skin that causes bleeding and is caused by or suspected of being caused by an animal.

The word “Cat” shall mean Felis catus.

The word “Collar” shall mean any collar constructed of nylon, leather, or similar material specifically designed to be used by a dog, cat or ferret.

The words “Confined or Confinement” shall mean confined within a building, house or structure or within a fenced yard or premises, so that the animal cannot escape from said building, house, structure or fenced yard or premises without human assistance.

The words “Cruel Manner” or “Cruelly Treated” shall mean a manner that causes or permits unjustified or unwarranted pain or suffering, tortured, seriously overworked, unreasonably deprived of necessary food, care, or shelter, cruelly confined or caused to fight with another animal.

The word ”Custody” shall mean the responsibility for the health, safety, and welfare of an animal subject to the person’s care and control, regardless of ownership of the animal.

The words “Dangerous Dog” shall mean a dog that makes an unprovoked attack on a person that causes bodily injury and occurs in a place other than an enclosure in which the dog was being kept and that was reasonably certain to prevent the dog from leaving the enclosure on its own or commits unprovoked acts in a place other than an enclosure in which the dog is being kept and that was reasonably certain to prevent the dog from leaving the enclosure on its own and those acts cause a person to reasonably believe that the dog will attack and cause bodily injury to that person.
The words “Dangerous Wild Animals” shall include lions, tigers, ocelots, cougars, leopards, cheetahs, jaguars, bobcats, lynx, servals, caracals, hyenas, bears, coyotes, jackals, baboons, chimpanzees, orangutans, gorillas, and any hybrid of these animals.

The word “District” shall mean the Galveston County District.

The word “Dog” shall mean a domesticated animal that is a member of the canine family.

The words “Health Authority” shall mean a licensed physician designated by the Galveston County United Board of Health and having filed an oath of office and appointed by the Board to fulfill the statutory requirements of the Texas Health and Safety Codes provide for animal control and rabies eradication.

The word “Foster” shall mean to give care and to promote growth and development of animals.

The words “Licensed Veterinarian” shall mean a veterinarian licensed in the State of Texas to practice veterinary medicine.

The word “Livestock” shall mean exotic livestock as defined by Section 161.001, Agriculture Code.

The word “Microchip” shall mean a transponder that is placed under an animal’s skin by an injector and can be read by a microchip scanner.

The words “Multiple Dwelling” shall mean any structure designed and intended to accommodate more than one (1) family and includes but is not limited to duplex buildings and apartment buildings.

The words "Necessary food, care, or shelter" shall mean food, care, or shelter provided to the extent required to maintain the animal in a state of good health.

The words “New Owner” shall mean a person who is legally competent to enter into a binding contract and who is legally competent to enter into a binding contract and who is adopting an animal from a releasing agency.

The word “Owner” shall mean any person or agency, which feeds, shelters, harbors, owns, has custody, possession or control, or has the responsibility to control an animal.

The word “Permanent Resident” means the place where a person has his or her true, fixed and permanent home and principal establishment to which, whenever absent, he or she has the intention of returning.

The word “Person” shall mean one as a human being, a partnership, or a corporation

The words “Properly Fitted” shall mean, with respect to a collar, a collar that measures the circumference of a dog’s neck plus at least one inch.

The word “Quarantine” shall mean the strict confinement of an animal in such a manner and period of
time as prescribed by the Health Authority at a facility approved by the Director of Animal Services or her designee and under restraint by a closed cage or paddock or in any other manner approved by DSHS rule.

The word “Rabies” shall mean an acute viral disease of man and animal affecting the central nervous system and usually transmitted by an animal bite.

The word “Restraint” shall mean a chain, rope, tether, leash, cable, or other device that attaches a dog to a stationary object or trolley system.

The words “Running at large” or “at large” shall mean that a dog is not under the control of the owner, or that of a person or persons authorized by the owner to care for said dog, either by cord, leash, chain or confinement.

The words “Secure Enclosure” means a fence area or structure that is locked, capable of preventing the entry of the general public, including children, capable of preventing the escape or release of a dog, clearly marked as containing a dangerous dog and in conformance with the requirements of the District. The structure/pen shall provide enough room for the animal on all four limbs to turn around without touching the sides of the structure/pen. The structure/pen shall provide protection from the elements for the dangerous dog. The Health Authority shall have the right to require more stringent logistics for the structure/pen based upon the type of dog to be kept in the enclosure and its anticipated ability to escape.

The words “Serious bodily injury” shall mean an injury characterized by severe bit wounds or sever ripping and tearing of muscle that would cause a reasonably prudent person to seek treatment from a medical professional and would require hospitalization without regard to whether the person actually sought medical treatment.

The word “Sterilization” shall mean the surgical removal of the reproductive organs of animals or the use of nonsurgical methods and technologies approved by the United States Food and Drug Administration or the United States Department of Agriculture to permanently render the animal unable to reproduce.

The word “Stray” shall mean roaming with no physical restraint beyond the premises of an animal’s owner or keeper.

The word “Torture” shall mean any act that causes unjustifiable pain or suffering.

The word “Trip” shall mean to use an object to cause a horse to fall or lose its balance.

The word “Tattoo” shall mean a permanent etching formed by injecting ink into the basal layer of the epidermis of an animal.

The word “Veterinarian” shall mean a person licensed to practice veterinary medicine in Texas by the State Board of Veterinary Medical Examiners.

The words “Veterinary Hospital” shall mean any establishment maintained and operated by a licensed veterinarian for surgery, diagnosis and treatment of diseases and injuries of animals.

**Back to Agenda**
United Board of Health
August 2019
Item #13
Tabled from Last Meeting: Consider for Approval the County Hiring an Outside Company to Evaluate all the Executive Positions in The District
(Submitted by John Hackbarth, DDS)
United Board of Health
August 2019
Item #14
Consider for Approval Enacting a Board Procedure to Conform with House Bill 2840
1. **What is H.B. 2840?**

House Bill 2840 is effective September 1, 2019. The bill amends the Texas Open Meetings Act to provide that “a governmental body shall allow each member of the public who desires to address the body regarding an item on an agenda for an open meeting of the body to address the body regarding the item at the meeting before or during the body’s consideration of the item.” Before the passage of the bill, the public had only the right to observe, rather than speak at, an open meeting of a governmental body.

2. **What right does the public have to speak on a particular agenda item?**

The public has the right to speak on each item on the agenda at an open meeting of all governmental bodies as defined by the Open Meetings Act, except for state agencies. Tex. Gov’t Code § 551.007(a).

3. **When does the public have the right to speak on items on the agenda of an open meeting?**

The Board must allow the public the right to speak on items on the agenda either at the beginning of the meeting or during the meeting when the agenda item is being considered by the Board. Id. § 551.007(b).

4. **Is the Board allowed to adopt reasonable rules on the public’s right to speak?**

Yes. The Board may adopt reasonable rules concerning the public’s right to speak at an open meeting. Id. § 551.007(c). The rules may include how long the person can address the Board on a given item. If the person addressing the Board needs a translator, the Board is required to allow at least twice the normal amount of time for the non-English speaker to address the body. Id. § 551.007(d).

5. **May the Board still allow the public to ask questions about items not on the agenda?**

The Board may decide to allow the public to ask questions about items not on the agenda. If the Board allows the public to ask questions about items not on the agenda, the Board can still apply reasonable rules regarding the number, frequency, and length of presentation, but it cannot discriminate against speakers. The Board will not be able to deliberate on any item that is not on the agenda. For such an item, the Board may either: (1) make a statement of fact regarding the item; (2) make a statement concerning the policy regarding the item; or (3) propose that the item be placed on a future agenda. Id. § 551.042.

6. **May the Board prevent the public from criticizing the Board or actions of the Board?**

A Board may not prohibit public criticism of the Board, including criticism of any act, omission, policy, procedure, program, or service. However, the bill “does not apply to public criticism that is otherwise prohibited by law.” Id. § 551.007(e). What public criticism is prohibited by law remains to be seen. Defamation would probably fall under that prohibition. In any case, the Board should be able to enforce a decorum policy for public speakers, so long as it doesn’t prohibit criticism.
Board Considerations:

1. Would the Board rather permit members of the public to speak on agenda items: i) prior to the start of the meeting; ii) when the item is initially presented for discussion; or iii) after the Board has deliberated upon the item but prior to Board members commencing motions on the item?

2. Would the Board like to set an allotted amount of time for individuals wishing to speak about an agenda (or non-agenda) item? In the past, the Board has generally (albeit informally) enforced a three-minute time limit.

*For the sake of clarity and to illustrate conformance with H.B. 2840, the Board’s instituted procedures regarding these matters will be denoted as a disclaimer at the bottom of all future agendas.*

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United Board of Health
August 2019
Item #15
Comments from Board Members